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ABSTRACT

Family day care is the largest source of nonparental care for young children and often provides the care many families require. In 1991-93, the National Center for Children in Poverty studied 10 local programs that support family day care providers in low-income neighborhoods to increase understanding about family day care and to learn from the experience of practitioners. This report places the work of these low-income programs in the context of current knowledge about family day care. It summarizes the similarities and differences among the programs studied, examines the challenges of providing such care, and identifies the strategies that can support and strengthen such care providers. Following an introduction, part 2 discusses the varying quality of care; the great range in the definition, regulation, and licensing of family day care; and the steps being taken to recruit, train, support, and organize family day care providers. Part 3 discusses the special child-care needs of low-income families, which can often best be met by family day care. Part 4 describes the primary aims of organizations and programs that successfully support family day care providers in low-income neighborhoods. Part 5 identifies four keys for Successful programs: (1) financial and material resources; (2) local people who are friendly, familiar, and trustworthy; (3) novel cooperative efforts; and (4) time for change to occur. The report concludes with case studies of 10 programs that help low-income day care providers. For each program, information is provided on its community, sponsoring organization, the family day care effort, program history, program services, project structure, funding, challenges, and next steps. (TM)

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IN THE NEIGHBORHOOD:

PROGRAMS

THAT STRENGTHEN

FAMILY DAY CARE

FOR

LOW-INCOME FAMILIES

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IN THE NEIGHBORHOOD: PROGRAMS THAT STRENGTHEN FAMILY DAY CARE FOR LOW-INCOME FAMILIES

by Mary Larner

NATIONAL CENTER FOR CHILDREN IN POVERTY
Columbia University School of Public Health

About the Center

The National Center for Children in Poverty (NCCP) was established in 1989 at the School of Public Health, Columbia University, with generous core support from the Ford Foundation and the Carnegie Corporation of New York. Its mission is to enhance the health and development of children under six living in poverty. The Center's work emphasizes strengthening the families and the communities in which poor children live, and improving the services children receive and the policies that affect their lives. The Center conducts interdisciplinary analyses and disseminates information about public and private initiatives in the areas of child and family health, early childhood care and education, and the integration of services for young children and their families.

About the Author

MARY LARNER, a researcher in the early childhood field, is director of early childhood care and education at the National Center for Children in Poverty. She began her career as a child care teacher and went on to earn a doctorate in human development and family studies at Cornell University. Her cross-project evaluation of community-based family support programs led to her co-authorship of *Fair Start for Children*, published by Yale University Press in 1992. She has also designed an evaluation of a nationwide training program for early childhood professionals, and she co-authored a report highlighting insights and principles that should guide child care consumer education for low-income families.

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EXECUTIVE SUMMARY

In a time of increased public investment in programs that prepare children to succeed in school and that help poor families become self-sufficient, child care is recognized as a critical community service. Although child care centers are often the most visible form of child care, the type of care that many children and families require is not easily provided in centers. For children under three, those whose parents work odd hours, those with disabilities, and those who speak languages other than English, child care offered in the home of the caregiver—called family day care—is often the parents' preference.

The urgent need of low-income parents to have access to child care of all types in the neighborhoods where they live is forcing policymakers and child care experts to focus on strategies that build the quality of child care in low-income communities. In recent years, subsidy programs that help parents pay for child care have expanded dramatically. One of these programs, the Child Care and Development Block Grant, earmarks a portion of funds for investments that will expand and improve the supply of child care available to low-income families. While many of the policymakers who will decide how to invest those funds are familiar with center-based child care, far fewer are familiar with family day care issues.

To increase understanding about family day care, and to learn from the experience of practitioners, in 1991–1993, the National Center for Children in Poverty (NCCP) studied local programs that support and assist family day care providers in low-income neighborhoods. Nominations by public officials and child care professionals from around the country identified 88 possible programs for study, and site visits to 10 programs yielded detailed information about program goals, activities, and resource requirements.

This report places the work of these programs in low-income communities in the context of current knowledge concerning family day care, and it reviews commonalities and differences among the programs. Case studies of the 10 visited programs appear at the conclusion of the analysis. Brief descriptions of all 88 nominated programs can be found in the *Directory of Family Day Care Programs with a Low-Income Focus*, published by NCCP in 1993.

Mary Larner

A toddler spending the day in a caregiver's home in rural Sacramento County, California, takes a look outside.

Organizing and Supporting Family Day Care

Family day care is a key component of the child care delivery system. In 1990, 30 percent of children under five with employed mothers were cared for in the home of a caregiver—in family day care. Even so, no one can say with confidence how much good care is provided in these small, private settings, and many experts believe the quality of care varies widely. Efforts to monitor, organize, and support family day care have not been instituted on the scale needed to assure quality.

Research and demonstration projects undertaken during the last decade have increased understanding about how regulation, recruitment, training initiatives, and ongoing supports such as provider networks, associations, and referral agencies contribute to the quality of family day care. However, much of what has been learned about the effectiveness of these support strategies comes from experience in middle-class communities. Building and maintaining a supply of good family day care in low-income communities poses more serious challenges.

Family Day Care in Low-Income Neighborhoods

Low-income families have special child care needs that are difficult to meet in traditional, center-based child care programs. The low-paying jobs of parents in such families often involve nontraditional hours, part-time work, and little job security. The neighborhoods in which these families live are poorly served by formal child care programs. For many, family day care is the most flexible, suitable child care alternative. However, the very features that make family day care attractive to low-income families can undermine the quality of care.

Many low-income families value care offered in a homelike setting, where a small group of children come and go according to their parents' schedules. Yet a provider's home may not be spacious or equipped for child care, and flexible schedules disrupt efforts to plan activities for the children.

Familiarity in the form of shared language and child-rearing values can promote trust between parents and caregivers. However, providers from disadvantaged minority groups often lack training because professional opportunities are seldom offered in their neighborhoods or in languages other than English. Also, a provider with a clientele of low-income parents scarcely earns the minimum wage, and cannot invest in the equipment and materials that will keep children safe and learning while they are in the family day care home.

Programs That Help Providers in Low-Income Neighborhoods

Programs that successfully serve low-income providers resemble those for providers of all income levels, but they are designed to offer more intensive, practical assistance. The programs studied by NCCP set out to solve different problems, and their varied goals have determined the mix of program activities and the types of providers who participate.

Four principal aims drive the choices of activities and target groups in the programs studied:

- *To expand the supply of child care in a specific low-income neighborhood,* through public education, outreach, assistance with regulation, and basic training in child care and business practices.
- *To present family day care as an employment option for low-income individuals, primarily women,* by helping them assess the financial viability of family day care and become family day care providers.
- *To help existing providers in a low-income community to succeed,* by investing in training and professional assistance, and linking providers to parents who need child care, to financial resources, and to one another.

- *To organize care in family day care homes for specific low-income children,* by selecting providers, training them, placing children in their homes, and monitoring the children's progress.

Work to support family day care in low-income neighborhoods is not the province of any one type of organization. These local programs are as likely to be sponsored by organizations that serve low-income communities as by professional child care groups.

The two types of sponsoring organizations have complementary strengths and limitations. Child care groups have expertise, experience, and influence related to child care policies and practices, but they have few ties to the residents of low-income neighborhoods. Community organizations have local connections and credibility, but they lack knowledge about child care and can give only limited substantive help to providers. Organizations that combine the strengths of child care and community groups, in their own staffs or through partnerships with others, are best able to establish programs for low-income providers that are well conceptualized, well rounded, and well received.

Keys to Success

Although the methods programs use to support family day care in low-income neighborhoods differ, the programs that work well share certain characteristics. The following lessons emerged from the experiences of the programs in the study:

- *Resources*—financial and material—enable low-income providers to offer safe, high quality care in their homes.
- *Local people* who are friendly, familiar, and trustworthy can reach low-income providers and draw them into the program's circle of supports.
- *Cooperative efforts* involving child care experts and representatives of low-income communities strengthen programs that improve child care in poor neighborhoods.
- *Time* is required to build the family day care supply—time for change to occur in public policies, organizational relationships, and human behavior.

The challenge for public officials, private funders, and other decision-makers is to establish funding strategies that promote and support the development of local-level programs with these characteristics. Those programs, in turn, will invest in the skills and talents of the family day care providers who care for children in poor neighborhoods, contributing to the development and success of both the children and their parents.

Mary Larner

A migrant mother who works in the orchards near Medford, Oregon, leaves her child each day in the care of a trained family day care provider.

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INTRODUCTION

In recent years, the challenge of ensuring a stable supply of good child care in low-income communities has assumed growing importance to public officials, early childhood experts, community leaders, and parents. The recognition that poor families must have child care assistance to secure and keep jobs has led to expanded public child care subsidy programs. These efforts have stimulated an interest in assuring that good care is available to the parents receiving subsidies.

If child care in the homes of relatives and friends is included, family day care is the largest source of nonparental care for young children. Thirty percent of children under five with employed mothers are cared for in these settings.[1] While the demand for center-based care has grown rapidly, the care that many children and families need is not easily provided in centers. For children under three, those whose parents work odd hours, and those who speak languages other than English, home-based child care is often the parents' preference. It can also be more affordable than center care, especially if care is needed for part of the day. As a result, parents, professionals, and policymakers have taken a fresh look at family day care.

The new sources of federal child care funds that became available in 1990 further intensified interest in family day care. Mandates accompanying the funding required that parents be free to use subsidies to pay for any legal form of child care, including family day care and care arranged with relatives or friends. Many states have now established payment mechanisms that allow subsidies to go to home-based caregivers—both regulated family day care providers and relatives or others not covered by regulations.[2]

Prior to this change, many state child care agencies placed subsidy-eligible children only in programs that held state contracts. In this type of system, a public agency could fund specific programs, set quality standards above the minimum levels required for licensing, and monitor performance to assure that the child care they paid for was of relatively high quality. Because of high costs and limited funds, however, and because most of the subsidized programs were in centers, parents often confronted long waiting lists. Families who were eligible for a subsidy but who preferred or needed a home setting, a non–English-speaking caregiver, or care during unusual hours frequently had to pay for child care themselves.

While a more open system brings many benefits, some experts and public officials are concerned that when voucher-style programs remove constraints on parental choice, they also remove protections for children. As public money has begun to flow into home-based child care settings, policymakers and professionals have become more interested in improving the quality of child care in private homes.

Assuring the Quality of Family Day Care

When public agencies seek strategies that promote quality, they focus primarily on regulation, and they attempt to bring providers into the regulated system. In some cases, they reduce standards and simplify the regulatory process; in other cases, they strengthen enforcement. The private sector often invests in programs that support family day care providers and help them improve the care they offer. These programs promote a new image of the family day care provider as a professional—not a baby-sitter—when they recruit new providers and encourage veteran caregivers to upgrade their skills and programs through training.

Knowledge about the success of these types of organizing efforts comes from middle-class communities. In low-income communities, providers live in poor housing, have little household income to invest in equipment and play materials, and must manage on the fees that low-income parents can afford to pay. What are the strategies for recruiting, training, and supporting providers that will work in these neighborhoods?

The Study

The substantial public interest in providing high quality family day care services to low-income families led the National Center for Children in Poverty (NCCP) to seek strategies that increase the availability and improve the quality of family day care homes in poor, stressed communities. With project funding from The Pew Charitable Trusts, in 1991, NCCP began a nationwide search to identify groups that work with family day care providers and that focus on low-income communities or on services for subsidized families. Professional associations (such as the National Association for Family Child Care and the National Association of Child Care Resource and Referral Agencies), child care advocates, state licensing departments, social service departments, land-grant college extension networks, and Child and Adult Care Food Program offices nominated local programs that, in their opinions, work effectively with family day care providers in low-income communities.

The nomination process yielded 88 programs that met project criteria. These are programs that involve providers who care for children in migrant families, in abusive situations, in urban housing projects, and in isolated rural areas. Their goals include improving policies and regulations, helping providers get started, or drawing unregulated providers into support groups. Some emphasize activities like training; others help providers form associations or link them to parents seeking child care.

Although some of these programs are sponsored by organizations that focus on children (such as Head Start agencies or child care resource and referral agencies), many are operated by community-based organizations with little child care experience but strong roots in the low-income neighborhoods they serve. Descriptions of the 88 nominated programs appear in the *Directory of Family Day Care Programs with a Low-Income Focus,* published by NCCP.[3]

Telephone interviews and the information in nomination forms enabled NCCP staff and an advisory group of child care experts to select 12 programs to study in depth. Two had not yet succeeded in implementing their innovative ideas, however, and this report rests primarily on the experiences of 10 programs in nine states —California, Connecticut, Georgia, Kentucky, Massachusetts, New York, Oregon, Pennsylvania, and Texas.

NCCP staff visited each program selected to learn how it works and to understand the policy and community context in which it operates. They explored community characteristics, the program's philosophy and history, its activities, the character of the family day care homes the program serves, and future steps that program leaders envision. Typically, NCCP visitors interviewed the program director and staff, visited family day care providers, met with community leaders or partners involved in collaborative efforts, and interviewed one representative of the child care licensing department and one social service official knowledgeable about public child care subsidies.

This report places these efforts in a broad context by examining the challenges of providing family day care in low-income neighborhoods, and by identifying the strategies by which community leaders, professionals, and policymakers can support and strengthen providers who live and work there. The report also includes profiles of the programs that were studied in detail. The 10 case studies characterize the community and sponsoring organization, outline the family day care work, explain the staff resources and funding that make the work possible, and note the challenges that face program leaders.

As state and local policymakers develop and improve child care subsidy programs, they also face the challenges of expanding and stabilizing a supply of good child care in low-income communities. The experience of groups that have already developed effective models, strategies, and family day care program approaches can guide new efforts and reduce frustration, waste, and inefficiency.

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ORGANIZING AND SUPPORTING FAMILY DAY CARE

Family day care, broadly defined, refers to all forms of nonparental care provided in the caregiver's home, rather than in the child's own home or a child care center. Traditionally, this type of care has been offered by relatives or neighbors who share the family's values and cultural background. A diminishing number of parents, however, have friends and relatives willing to provide child care services. As extended families disperse geographically and as out-of-home employment of women increases, family day care is taking on a more formal character. Today, many caregivers see themselves as operating businesses, offering their services in the open market.

A national survey of child care programs conducted in 1990 showed that 30 percent of all children under five whose mothers worked outside the home spent time in a relative's home (11 percent) or in a family day care home (19 percent); 27 percent attended programs in centers; and 43 percent stayed with their parents, were cared for in their own home, or were in other arrangements.[4] (See the table at the right.)

Parents generally arrange for infants and toddlers to be cared for in their own homes. They rely on centers more as the child reaches three or four years of age and seems ready for group learning. The proportion of children who receive care in another person's home fluctuates between 27 percent and 33 percent for infants, toddlers, and preschool children.

Despite its significance as a form of child care, family day care still lies largely beyond the reach of public agencies and professional organizations. It is estimated that public agencies regulate no more than 20 percent of family day care homes, although many of those homes include so few children that state regulations do not apply.[5] Although the number of family day care associations and referral agencies is growing, relatively few home-based caregivers benefit from the supports those organizations offer.

Quality in Family Day Care

Experts have long felt that the quality of family day care varies widely. Some of the best (and most expensive) and some of the most problematic care is offered in family day care homes. On the positive side, the small size and intimate nature of the family day care home allows ample opportunity for one-on-one interactions between the child and the provider; many children benefit from the mixed-age groups that are typically enrolled; and the flexibility of the home setting offers a rich environment for exploration and discovery. On the other hand, most providers have not been trained for their work, and some enroll more children than they can comfortably or safely handle. Often, these homes contain safety hazards because they were not designed for groups of children.

Types of Child Care for Children Under Age Five Used by Families with a Mother Who Is Employed

Type of care	All children under 5	Children under 1	Children aged 1–2	Children aged 3–4
Center-based care	27%	14%	21%	37%
Family day care (unrelated caregiver in caregiver's home)	19%	20%	20%	17%
Relative (in relative's home)	11%	11%	13%	10%
Relative (in child's home)	6%	8%	8%	5%
Parent, in-home sitter, or some other care	37%	47%	38%	31%
	100%	100%	100%	100%

Source: Hofferth, A.; Brayfield, A.; Dietch, S.; & Holcomb, P. (1991). The National Child Care Survey 1990 *(Urban Institute Report No. 91-5). Washington, DC: Urban Institute Press.*

Research has confirmed some of these observations. Several investigators have interviewed child care providers to learn how their programs match standards of quality along several dimensions: the number of children in the group, the ratio of children to adults, and the child-related training that adult caregivers have had.[6] The average group size in regulated family day care homes hovers around six, with five present on a full-time basis.[7] Center-based programs have an average of 17 children in classrooms of three-year-olds. Since most family day care providers work alone with their small groups of children, the ratio of children to adults averages five to one, compared with 10 to one in the average center room for three-year-olds.

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These numbers confirm that the structure of a family day care home allows for frequent and intimate contact between adults and children. This is an important aspect of good child care. On the other hand, family day care providers are considerably less likely to have had training in child development or child care practices than are the staff who work in centers: 64 percent of regulated family day care providers have received some child-related training, compared with over 90 percent of center teachers. The providers also have had somewhat less formal education: 11 percent have completed college, compared with 47 percent of the teachers in centers.[8] Family day care appeals to many providers precisely because it is open to those who have not had access to formal educational opportunities.

Most studies of family day care focus on regulated family day care homes. Researchers can easily identify these providers from lists held by state authorities. Relatively few investigators have examined the care offered by caregivers who are not regulated.

Two recent studies have included those providers, many of whom care for so few children that they are exempt from regulation. A telephone survey found that nonregulated homes averaged only two full-time children, and regulated homes averaged five full-time children.[9] Only one-third of the nonregulated providers had received training related to children, compared with two-thirds of those who were regulated. The second study included observations of caregivers and children, and it revealed that regulated family day care offered more positive experiences to children than did smaller, nonregulated settings.[10]

These contrasts reflect the different attitudes with which the two groups approach caregiving. Some individuals view family day care as a business they have chosen; these are the providers likely to formalize that choice by meeting regulatory requirements in order to avoid possible problems. Others initiate caregiving informally and gradually, taking in one or two children as a favor to a grown daughter or as a source of income while they are home with their own preschoolers.[11]

As Amy Gendall, a professional who works with providers in a Philadelphia neighborhood, explains:

> *What I've heard from more people is, "The story of how I got into this was, I was taking care of my grandchildren anyway. . . ." or "All of a sudden I found I had all my nieces on my hands, and then. . . ." What happens then is that they become family day care providers.*

Some of these caregivers go on to care for children they do not already know, and gradually they begin to view family day care as a career. Like those providers who set out to open a child care business, they may become licensed, seek training, advertise their services, or join a family day care association. None of these homes are as visible as the large, brightly painted child care centers in the town, but the services offered by all types of family day care providers are a critical resource for employed parents in their neighborhoods.

As family day care gains recognition as a legitimate part of the child care delivery system, interest is growing in efforts to recruit, train, and support providers. A number of these efforts—which focus on providers of all income levels—are reviewed below.

Family Day Care Regulation

Public officials have traditionally relied on regulation as a way to assure the safety and adequacy of child care programs, both in centers and in private homes. Regulations establish by law the physical and programmatic standards that must be met before care can be provided to a given number of children in a certain setting. Formal licensing works relatively well at assuring minimum protections for children in child care centers that are visible businesses serving sizable groups of children. However, many states have had less success regulating family day care homes.

In 1993, relevant state authorities knew and regulated 273,926 family day care providers.[12] No one knows for certain how many individuals are caring for children in their homes without notifying public agencies, but one study's results suggest that 80–90 percent of caregivers are not regulated.[13] Some policy analysts have questioned the value of a regulatory system with such poor coverage.[14]

States vary in their definitions of family day care and where they draw the line between family day care and "informal" caregiving—which is considered a private arrangement not requiring any regulation. Some states exempt from regulation those caregivers who care for a few children or for only children related to them.

As the table below shows, 16 states exempt those caregivers with three or fewer children, and five exempt those who care for up to six children. Another eight states require caregivers with three children or fewer to be regulated only if they receive public funds for providing child care services. Family day care regulations have a ceiling, as well as a floor, in most states. Three-fourths (38) of the states do not allow more than six children to receive care in a family day care home on a full-time basis, while seven of these states allow additional children to join the preschool group before and after school.

●

States vary in their definitions of family day care and where they draw the line between family day care and "informal" caregiving.

State Approaches to Family Day Care Regulation

Regulatory expectations for the caregiver	Homes with 3 or fewer children	Homes with 4–6 children	Homes with more than 6 children
Exempt from regulation	17 states	5 states	1 state
Regulated only if receiving public funds	8 states	6 states	1 state
Registration required	14 states	18 states	3 states
License required	12 states	15 states	8 states
Requirements vary within this category		7 states	
Not allowed			38 states
Total:	51 states	51 states	51 states

Note: Washington, DC, is included as a state, giving a total of 51.

Source: Family Day Care Advocacy Project. (1993). 1993 family day care licensing study, 1993. *Washington, DC: The Children's Foundation.*

State family day care regulations differ somewhat less in other respects. Sometimes regulations specify the amount of space that must be available for each child. They also spell out fire and building safety requirements. In some states, providers must show proof that they have complied with local ordinances and codes by paying for permits, arranging inspections by building engineers and fire inspectors, and completing any repairs or improvements that are needed to bring their homes "up to code."

●

Meeting regulatory requirements is costly for providers in many locations.

Mary Larner

Family day care providers must adapt their homes to conform with state regulations. This San Francisco caregiver has installed a barrier between the playroom and the kitchen that is safe and provides visibility.

In 30 states, regulations oblige the provider to pass a health examination, and 11 states insist on health examinations of other adults in the home. Criminal background checks are being added in more and more states, and liability insurance is a requirement in 12 states. About half the states require providers to attend training for a specified number of hours, ranging from two hours every five years in Iowa to 20 hours every year in New York and Wisconsin.[15]

Meeting regulatory requirements is costly for providers in many locations. In Georgia, the licensing guidelines booklet costs $5. Fees and expenses crop up at many points in the regulatory process. Physicians charge for the health examinations and tuberculosis tests that many states require; and public agencies require fees for criminal record checks. Arranging building and fire inspections and securing the occupancy permits required in some localities costs $200 or more. If the provider's home does not meet the criteria set in the regulations, home improvements and equipment (such as fire extinguishers, cots for all children, or radiator covers) frequently cost another $500 or more. Other costs recur each year. Training courses, if not paid for with public funds, have registration fees; liability insurance costs the provider several hundred dollars each year. Given these expenses, it is not surprising that many providers choose to remain unregulated.

States handle regulations differently. The traditional practice has been to license family day care providers, requiring by law that they meet state standards as a condition of operation. One state agency reviews applications, inspects homes, approves licenses, and regularly monitors providers' homes for compliance with licensing standards. The table on page 13 shows that 12 states require licensing for providers caring for three or fewer children; a larger number of states require licensing for providers who care for more than three children. A number of states have shifted away from licensing toward more limited systems of registration, in which providers are encouraged to identify themselves to the state authorities and to certify that they comply with the state's standards and requirements. In registration systems, public oversight typically takes the form of unannounced visits to a random sample of registered providers each year, as well as inspections whenever complaints are made.

A shift toward registration can bring more providers into the regulated system. The process is simpler than licensing, and it eliminates the most burdensome inspection requirements. Registration acknowledges the significant differences between child care centers and family day care homes because it establishes guidelines designed specifically for family day care. Most licensing requirements and procedures were developed for larger institutions, such as centers and nursing homes.

Registration also reflects the recognition by many licensing agencies that they lack the budget and staff capacity to enforce licensing standards uniformly across a state in a large number of small family day care homes. Registration systems, in which no inspection visit is required, leave to the parents the responsibility to determine whether or not a home offers a safe and appropriate child care environment.

Former Head Start director David Hunt in New York State, which recently changed from a licensing system to one of registration, comments:

> *The debate around registration involves the state's inability to fulfill its legal responsibility. They are saying, "We do not have the people power to monitor child care. We are falsely reporting to the population what our role is, and we have to do something that reduces our liability." Registration does that.*

Despite efforts by many states to streamline the regulatory system for family day care, a significant proportion of all providers do not identify themselves to the authorities—in some cases because they want to avoid paying taxes by working "off the books." Pressure from parents might prompt providers to become regulated, but many parents view regulation as an uninteresting bureaucratic detail, unless they have subsidies or employer assistance funds that apply only to regulated settings.

Barbara Wise of Hornell, New York, a provider who has worked in a rural area for 18 years, summarizes her experience: "If the parents like you, they like you. If they don't, they don't. Never once did anyone ask to see a license." Providers usually become regulated because they prefer to operate legally, or because they want to participate in support programs that are available only to regulated providers, such as the federal Child and Adult Care Food Program, described on pages 19 and 20.

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A shift toward registration can bring more providers into the regulated system. The process is simpler than licensing, and it eliminates the most burdensome inspection requirements.

Recruitment and Training Efforts

Family day care initiatives undertaken by private groups complement the efforts of public officials to expand and improve family day care. Professional groups, community-based organizations, and private funders have taken many steps to invest in the recruitment, training, and organization of family day care providers.

Public information and recruitment campaigns increase a community's awareness of family day care and the regulatory standards that govern it. They encourage providers to comply with regulations, and they make parents more likely to expect regulatory compliance. For example, a four-year initiative of the National Council of Jewish Women prompted members of 29 local volunteer organizations to work collaboratively with others in their communities to remove specific barriers to the development of good family day care.[16] Some groups advocated for change in restrictive zoning policies, or they launched public education campaigns. Others worked to increase the number of providers. The organization's local chapter in Baltimore initiated a project, Side-by-Side, that linked would-be providers with mentors. These individuals consulted with the interested caregivers by telephone throughout the regulatory process, and offered them equipment and materials worth up to $500 to help them meet regulatory requirements. Providers who accepted the materials agreed to serve infants or children eligible for public subsidies—care that the community particularly needed.

● **Training and professional recognition are the tools used in the nationwide Family-to-Family initiative, which aims to improve family day care quality and reduce provider burnout.**

Recruitment is also the primary aim of the California Child Care Initiative Project, a comprehensive model program that works through resource and referral agencies to build the supply of family day care. This project has been implemented in 25 California counties, and it has worked in Latino communities throughout the state. It has also been replicated in Michigan and Oregon. The project begins by identifying areas where a shortage of care exists. Resource and referral agencies then recruit individuals who have the potential to succeed as licensed family day care providers, train them in child care and business practices, help them through licensing, and link them to workshops, toy lending libraries, and parent referrals.

A 1989 study of participants in this project showed that only two-thirds were caring for children after one to two years. Interviews with those who did not continue as family day care providers indicated that the economics of family day care forced many to look for other forms of employment.[17] Providers with higher household incomes in general were more likely than others to stay in the family day care business. This project developed thousands of new family day care homes, but the high rate of turnover among providers makes the process "akin to filling a bucket that has a hole in the bottom."[18] The project's leaders concluded that to be effective, recruitment efforts should also build in supports that help new providers stay in business.

Training and professional recognition are the tools used in the nationwide Family-to-Family initiative, which aims to improve family day care quality and reduce provider burnout. This project was conceived and funded by Mervyn's, Target Stores, and the Dayton Hudson Foundation. Begun in 1988, Family-to-Family has enabled agencies across the country to offer a 15-hour family day care training course, to help providers become accredited, to create or strengthen provider associations, and to conduct consumer education activities for parents.[19] At the local level, many Family-to-Family projects were sponsored by resource and referral agencies; in some cases, grants were directed to community colleges or provider associations.

In many communities, Family-to-Family offered the first training opportunities that had been designed for and led by family day care providers. By the close of the grant period, the sponsoring organization had developed a training package tailored to the needs and concerns of providers, and the project had created an energized, confident group of providers eager to have more training and to transform the image of family day care in their locales. In many of the sites, however, the training reached primarily the most active, professional providers—those who stay in touch with developments in the community and watch for new opportunities. If such a training program could be sustained and assertively marketed to providers of all types, such as those who require more support, its benefits might be more widespread and powerful.

The 1980s also brought the maturation of the National Association for Family Child Care as a national voice for the professional family day care community. This association has developed an accreditation system to recognize providers who meet professional standards, and it is working to build the capacity of the growing number of local associations.

These initiatives have been in the vanguard of the movement to increase the visibility and professionalism of family day care in the United States. The strong provider response to public awareness activities, recruitment efforts, training courses, and association building demonstrates that family day care providers can be better described as underserved than underground. When efforts are invested in making information and appropriate services available to them, providers come forward and ask for more.

Ongoing Supports

Even providers who are regulated and trained, however, often find that family day care is an isolating job. Many home caregivers hunger for opportunities to meet other providers, to share ideas and frustrations, and to have a voice on public issues that influence family day care. Providers also benefit from linkages to larger organizations or agencies that refer parents to sources of child care, administer public subsidy programs, or offer other financial supports. Several ways to organize providers have emerged over the last 10 years. Among the most prominent are associations, networks, referral agencies, and systems organized by employers and social service agencies.

Family day care associations. These organizations, operated by and for family day care providers, offer social support and a public voice for members. Some are small neighborhood groupings that exist primarily to give members a chance to meet and talk. Others are more formal, offering a wide array of supports, including workshops and conferences, policy updates and advocacy activities, parent referrals, and access to group liability insurance. Typically supported by dues and fund-raising, associations rely on volunteers to lead the organization and get things done.[20]

Mary Lerner

Many of the local programs that support family day care providers help them form provider associations. Here caregivers in Hartford, Connecticut, plan an activity together.

BEST COPY AVAILABLE

Networks that link providers to the federally funded Child and Adult Care Food Program. The federal food program offers subsidies to cover the costs of eligible children's meals, and it reaches providers through the work of sponsors. Sponsoring organizations enroll providers who meet applicable regulatory requirements, and they arrange nutrition education services, monitor the food served in the homes, and manage paperwork and reimbursements. Half of the sponsoring agencies also provide a wider array of services to the providers in their networks, including newsletters, toy lending programs, and support group meetings.[21]

Provider associations, resource and referral agencies, federal food program and employer-organized networks, and family day care systems are all signs of an emerging infrastructure that can develop and support professionalism in family day care.

Child care resource and referral agencies. These groups link regulated family day care providers with parents, helping providers to find clients and maintain enrollment. This assistance is important to providers who want to reach beyond family and friends, but who have no experience marketing their services. Resource and referral agencies can also serve as food program sponsors, and they may offer start-up assistance to providers, training for caregivers, and support through telephone "warm" lines.

Employer-organized networks. Some employers help workers with child care needs by organizing networks of providers to offer care exclusively or on a priority basis to their employees. Some of the networks expect providers to meet specific criteria or to attend training sessions; others offer voluntary supports at the employer's expense. The U.S. military has actively developed family day care networks on bases around the world—the navy works with about 1,000 providers, and the army with over 7,000.[22]

Family day care systems. Systems are typically funded by public agencies or charities to serve children from low-income or stressed families, and they usually work closely with a defined group of family day care providers. The system determines the children's eligibility and places them in the homes, handles financial arrangements, gives the providers support from professionals and peers, and helps them respond to families' health and social service needs. Social service agencies, publicly supported child care centers, and Head Start programs sometimes work with providers in this way, although the prevalence of such systems is declining as more child care subsidies reach parents directly in the form of vouchers or certificates.[23]

Provider associations, resource and referral agencies, federal food program and employer-organized networks, and family day care systems are all signs of an emerging infrastructure that can develop and support professionalism in family day care. Many of the efforts described here focus on middle-class communities, rather than low-income areas, but their experiences yield important insights about how individuals decide to become providers, choose whether to become regulated, and judge when it may be time to look for other work. This type of knowledge can undergird the development of effective strategies for recruiting, strengthening, and retaining providers in low-income communities, as well.

Reaching into Low-Income Communities

The special problems faced by providers in low-income neighborhoods have attracted relatively little attention when compared with the last decade's emphasis placed on developing family day care in middle-class communities. Through the 1970s, the major groups working with family day care providers in low-income areas were social service agencies that operated family day care systems to provide care to children covered by public subsidies. Most of these agencies screened, trained, and supervised the providers in their systems carefully, but they did not extend support services to other caregivers who might be working independently in the same communities.

More recently, several family day care demonstration programs supported by philanthropies have focused on low-income providers as independent entrepreneurs. They have helped providers establish businesses, offered training and financial assistance, and prepared the providers to succeed.

One example is the William Penn Foundation's Career and Child Care Choices project, which began in 1985 and reached 400 economically disadvantaged Philadelphia women over three years, of whom 129 became child care providers. Another is the Low-Income Provider Support project in Minneapolis and St. Paul, funded by the McKnight Foundation in 1988. In that project, resource and referral agencies helped 64 new providers get started in ethnically diverse, low-income neighborhoods.

Also in 1988, the Ford Foundation initiated its support for the Neighborhood Child Care Network, a grass-roots community outreach effort to establish relationships with unregulated providers in several inner-city neighborhoods in Atlanta. In 1991, a consortium of public and private funders assembled by the Harris Foundation launched a five-year project in Chicago called the Family Child Care Connection. This effort enabled existing child care programs in low-income areas to establish satellite family day care networks that recruit, train, and support new providers. To make family day care financially viable for these low-income women, the Illinois social service department agreed to pay the project providers who care for two or three subsidized children a higher rate than usual.

Several public agencies, as well, have reached out to family day care providers in low-income neighborhoods. In 1990, the Food and Nutrition Service, the federal agency that administers the Child and Adult Care Food Program, made grants to food program sponsors in six states to develop strategies for increasing the participation of low-income providers in the program.[24] Since the mid-1980s, the national Head Start program has allowed selected local grantees to experiment with models that link family day care providers to Head Start's center-based programs—as a way to reach children whose parents

Mary Lerner

This provider's home in rural Steuben County, New York, reflects the importance of toys and equipment to a young child's development. These materials are available on loan from the Steuben Child Care Project.

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have full-day work schedules. In 1992, Head Start formalized this interest in family day care by launching a national demonstration project to examine the effectiveness of offering Head Start services through family day care homes. Both of these federal efforts include funds for evaluations that will enable the lessons that program developers learn to be considered by others.

Although the goals of all of these initiatives differ, as do the methods they have adopted, the programs have found it more challenging than anticipated to increase the supply of regulated, high quality family day care in low-income neighborhoods. Nevertheless, the child care needs of low-income families are pressing, and family day care is an important part of the service system on which these families depend.

The remainder of this report focuses on family day care in poor communities: the parents who use it, the providers who offer it, and the programs that community agencies have developed to improve its quality.

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The child care needs of low-income families are pressing, and family day care is an important part of the service system on which these families depend.

FAMILY DAY CARE IN LOW-INCOME NEIGHBORHOODS

The child care needs of low-income families are frequently overshadowed by the attention given to the concerns of professional and middle-class families, but they are no less consequential. A large proportion of low-income mothers have traditionally worked. In 1987, 37 percent of children under six whose families were poor lived on employment earnings alone and did not receive public assistance.[25] Moreover, programs designed to reform the welfare system by helping families to achieve self-sufficiency now draw increasing numbers of welfare recipients into job training or school. As a result, more and more children in low-income neighborhoods, as well as in middle-class and wealthy suburbs, spend their days in child care centers and family day care homes.

Access to good child care—care that meets the needs of parents and that supports the development of children—is critical if parents are to succeed in their struggle to hold jobs and become (or remain) economically independent. Many families find that the best alternative available to them is child care in another person's home. This chapter examines the fit between low-income families and family day care. It also reviews the challenges of offering good home-based care in neighborhoods dominated by poverty.

The Special Child Care Needs of Low-Income Families

Low-income families do not differ greatly from wealthier parents in the types of non-parental child care they prefer, although financial considerations make them more likely to turn to relatives or family members than to centers or unrelated family day care providers. They value the same child-oriented features of care that wealthier parents value, seeking care that is safe and nurturing for the child, and that offers social opportunities and new learning experiences that support the child's development.[26] However, finding the child care that meets these criteria is no easy task for any parent. It is especially difficult for low-income parents because they make child care choices in a context that is filled with constraints.

Limited financial resources are the most obvious constraint these parents face. Experts say that to be affordable, child care should account for no more than 10 percent of a family's income. However, a national survey conducted in 1990 showed that low-income families (those earning less than $15,000 per year) with an employed mother spend 23 percent of their household income on child care, even taking into account the partial subsidies that some parents receive.[27] The process of searching for care that is both desirable and affordable frustrates many.

The jobs held by low-income working mothers frequently pose problems for them when they have to make child care arrangements. Low levels of education consign many to pink-collar jobs in service industries, where wages are low, benefits are lacking, and work shifts go beyond the traditional hours of 8 A.M. to 6 P.M. A study of employed welfare recipients who had preschool children found that close to 30 percent of the child care users needed care either before 6 A.M., after 7 P.M., or on weekends.[28] Many centers are open from 7 A.M. until 6 P.M. on weekdays, but their hours are fixed. Penalties for late pickup are an added child care cost for parents who cannot arrive on time. More-over, many low-income parents can find only part-time work, and they need child care arrangements that do not

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Access to good child care—care that meets the needs of parents and that supports the development of children—is critical if parents are to succeed in their struggle to hold jobs and become (or remain) economically independent.

require attendance (and payment) on a full-time basis.

Job security is another concern for low-income parents. When attendance is a crucial aspect of job performance, parents need a caregiver who will accept a child who is mildly ill. The study of employed welfare mothers revealed that during an eight-month period, mothers whose children were with relatives or in family day care settings missed an average of one day of work to be with a sick child. Those using center care missed six days for the same reason.

Entry-level employees can be more vulnerable to layoffs than others, and to having their hours cut to save company costs. These situations can force them to withdraw abruptly from child care arrangements. A center or a family day care provider who relies on her income from child care has to fill any space left vacant as soon as possible—so if a parent who has lost a job returns to work, a new child care arrangement has to be found, and the child must adjust to a new setting, new people, and new expectations.

Mary Larner

Low-income parents seek the same attributes in a child care setting that wealthier parents seek—safety, a nurturing environment, and learning experiences. Here a Texas caregiver plays "telephone" with a toddler.

The child care options available in low-income neighborhoods are often unsatisfactory. These areas are generally poorly maintained, underserved by public transportation and other community services, and inhabited by families with too little money to meet basic family needs. This environment creates a community context that cannot support an array of high quality child care services. Moreover, the lack of reliable transportation often traps low-income parents in their neighborhoods. Many families cannot afford the insurance or maintenance costs of a car, and using child care in another neighborhood means taking public transportation from home to the child care setting, to work, and back home again—with tired children in tow.

All these family poverty correlates—the lack of money to pay for good care, working conditions that include nontraditional hours and strict attendance policies, lack of job security, and residence in neighborhoods that lack good child care services and public transportation—restrict the child care choices of many low-income families. Sometimes these difficult circumstances lead parents to choose family day care over center-based care. The same circumstances affect providers in poor neighborhoods. Serving a clientele of low-income parents is often problematic.

Providing Family Day Care in Low-Income Neighborhoods

From many vantage points, family day care appears to be especially well suited as a child care service for low-income families. However, the very characteristics that make family day care attractive to parents can undermine its quality, and the threats to quality are especially serious in low-income communities.

Family day care offers advantages that are important to low-income families: the care is offered in a home environment nestled in a neighborhood setting; it is small-scale and flexible, with mixed-age groups and negotiable hours and sick-child policies; it gives parents the opportunity to choose the specific individual who will care for the child—someone who speaks the family's language and shares the family's child-rearing values; and it is relatively affordable. However, these strengths can also be limitations. The similarity of the family day care provider and home to the parents and their residence underlies both the qualities and the risks of family day care in low-income neighborhoods.

Residential setting. Many parents value the homelike atmosphere offered in family day care. It allows intimate contact between the caregiver and the child, and it offers the young child a familiar neighborhood setting. However, family day care homes and neighborhoods often share the shortcomings of children's own homes. The indoor environment is not typically designed for children and may contain hazardous conditions, be inconvenient, or be vulnerable to damage by children's play. City apartments, in particular, are often crowded and lack outdoor play space. The outdoors can pose problems, as well, if children in rural settings encounter machinery, animals, or unfenced creeks.

Providers in low-income neighborhoods face poor housing conditions that are difficult for them to remedy. Most have little capital to equip their homes for child care before they begin to enroll children, and cribs and cots, rockers and tricycles, toys and learning materials may be in short supply. Some apartments lack safe exits in case of fire, or they may open onto dangerous hallways. The home can contain hazards that the provider cannot remove without the cooperation of a landlord, such as exposed heaters, unprotected windows or stairs, peeling paint, or malfunctioning plumbing.

Many providers in low-income neighborhoods cannot afford to meet regulatory standards, especially prior to receiving any income from child care. Information about regulatory expectations is particularly lacking for providers who do not speak English. Few states provide guidelines, information, and orientation sessions in languages other than English. This makes it difficult for some providers to learn about and comply with relevant laws.

Small size and flexibility. For many parents, the small size and flexibility of the family day care home is an advantage. Siblings of varied ages can be cared for together at the same home, including school-age children who need care for only a few hours a day. Providers have more flexible policies on accepting children who are mildly ill than do most centers, in part because they can isolate sick children in a bedroom relatively easily. Moreover, family day care providers have more flexible schedules and available hours than centers. Regulated providers care for children for an average of 55 hours a week, opening before breakfast and keeping children until dinnertime; 13 percent also care for children in the evening.[29]

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Few states provide guidelines, information, and orientation sessions in languages other than English. This makes it difficult for some providers to learn about and comply with relevant laws.

Janet Jackson, a provider in Houston, explains her flexibility: "I've been a low-income, single mother, so I know what that's like. So I say, 'Bring them in their pajamas, I'll feed them.' Because I know what it's like."

One consequence of both the intimacy and the flexibility of the family day care home, however, is that the provider may not structure the day well or plan ahead for child-oriented learning activities. Planning is difficult when the day care children are of varied ages and have different schedules of activity and rest, and those problems are exacerbated when the children come and go at all times of the day.

Spending extended hours with children can be exhausting, as well. Some providers in low-income neighborhoods keep children overnight as a way of maintaining sufficient income without violating state regulations about the number of children who can be in care at any given time. They may be responsible for children around the clock and may lack the time and energy required to plan activities. Caregivers who cannot afford to pay an assistant to take over while they attend to personal business may be tempted to leave the children alone while they make telephone calls, handle paperwork, or just take a break.

Trust in and familiarity with the caregiver. Many parents trust center-based care because a center is a relatively formal, public place where a number of adults work with the children and can see what is going on.[30] Others, however, feel that home-based child care better allows them to get to know and trust the individual who will be caring for their child every day. Parents who use family day care often decide in discussions with the caregiver the particular way their child will be supervised and nurtured.[31] This type of trust is the greatest when parents have a relative or friend who can offer child care, but it can also be present for families who place their children with a regulated provider found through a referral agency. Generally, parents seek a provider who speaks the family's language and shares the family's culture and child-rearing values.

The tension parents face, however, is that by finding a caregiver who shares the family's background, values, and general circumstances, they also may be hiring someone who shares their own limitations and stresses. Caseworkers who help welfare recipients arrange child care report that, although relatives and friends are the first choice as caregivers for many parents, those arrangements often break down. The selected caregiver's life may be as unpredictable as the welfare mother's, and if a personal conflict, a job opportunity, or an illness comes up, the child care commitment is easily broken.

Moreover, providers in low-income communities often come from disadvantaged backgrounds, with no education beyond high school and, perhaps, limited proficiency with the English language. These factors may have little to do with the provider's warmth or skill as a caregiver, but they can limit an individual's access to new caregiving ideas, training, and professional supports.

Affordability. All parents worry about the cost of child care. Low-income parents find that cost is frequently the factor that most determines what child care they can use. A 1990 national survey of programs revealed that the hourly fee in family day care homes was about the same as the fee charged by centers ($1.60 per hour).[32] However, while most centers require full-time enrollment, home-based providers often allow parents to pay only for the care they use. Such policies make care more affordable to parents with part-time or fluctuating schedules. However, that affordability for parents limits the providers' income and diminishes the capital

The Difficult Economics of Family Day Care as a Small Business Enterprise

A woman with two young children of her own at home provides care for three other toddlers from low-income families. She charges $50 a week per child for full-time care. If all three children attend full-time for 50 weeks a year, and if their parents pay the full fee, the family day care provider will earn $7,500 annually from her family day care business. Assuming she works a nine-hour day, five days a week, this amounts to an hourly wage of $3.33—well below the minimum wage of $4.25. Also, from these earnings she must deduct self-employment tax for social security, the costs of the children's meals, liability insurance premiums, and numerous other expenses necessary to providing child care services in one's home. All of her work still leaves her family below the poverty line.

she can invest in her child care program. Survey researchers estimate that regulated providers earn an average of $4.04 an hour. Unregulated providers, who take in fewer children, average only $1.25 an hour.[33]

When a provider earns so much less than the minimum wage and works more than 50 hours each week, it is difficult to imagine how she can purchase the supplies, toys, books, and substantial equipment (like cribs, cots, and climbing structures) that will keep children safe and will promote their learning.

Financial pressures are especially intense for providers in low-income communities. The families they serve can seldom afford to pay fees that approach the cost of good care. Family day care providers negotiate their fees with parents individually, and many find it difficult to ignore their clients' economic hardships. They often agree to reduce their already low rates. As one provider comments, "You just can't take half of a person's check for child care."

Parents' job insecurity also translates into uncertainty for the care provider. If the child care becomes too costly for a parent to continue, the provider can be left with unexpected vacancies. Providers in these circumstances find it difficult to manage financially without compromising the quality of their care. How tempting is it for her to add one or two children more than she knows she should care for—so she can stay afloat financially?

The insularity of low-income neighborhoods in the United States concentrates economically vulnerable families together. The poor and working-class families who use child care have special needs, but they have less money than other families to spend on care. They need more for less. The caregivers in these neighborhoods, whether they think of themselves as family day care providers or as baby-sitters, identify with the parents and want to help the children. But they also have to earn enough to pay their own rent and grocery bills, and to buy crayons, tissues, and soup and crackers for the children.

The Financial Viability of Family Day Care

Recognition of the daunting economics of family day care in neighborhoods where parents can pay little for child care leads to debate about the ethics of developing family day care in poor communities. Many groups challenge the value of helping low-income individuals embark on careers in family day care when so many caregivers find it difficult to make ends meet.

Nevertheless, professionals who work with providers in low-income communities point out that family day care, with all its uncertainties, can be a plausible employment option for some individuals. The lack of benefits and the limited income potential do make it an unsatisfactory alternative for a mother seeking to support young children by herself. But most low-income families are headed by two parents, and family day care can make financial sense when one adult's modest income from child care supplements other sources of income—and is not the family's sole source of support. Frequently, low-income women turn to family day care as a business after their own children have grown and their financial needs are more modest than in earlier years.

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Family day care can make financial sense when one adult's modest income from child care supplements other income sources—and is not the family's sole source of support.

Despite the uncertainty and risk it may bring, the opportunity to become self-employed appeals to many individuals, especially those who work in tedious, menial jobs or who have experienced discrimination because of their gender, age, skin color, or accent. Economic expectations are influenced by past experiences; the minimum-wage income that seems insulting to a woman who has held professional or office jobs may look good to one who has been on welfare or can find only part-time work in a restaurant that does not offer fringe benefits. This situation is especially true for groups with few job opportunities to choose among—women who do not speak English, for example.

Family day care is an occupation in which human qualifications and life experience contribute significantly to success. Providers themselves describe the qualifications a caregiver needs in terms of temperament, imagination, and dedication. Marilyn Kelty of Philadelphia explains that she is cautious about suggesting to acquaintances that they consider family day care as a job:

> *I recommend it to some people. I say it is not for everyone. For one thing, you have to have patience. You have to have a sense of humor. I think you really have to have a love for children.*

Mary Lerner

Family day care does not pay very much, especially in low-income communities, so many caregivers turn to it after their own children are grown—as a supplement to the family's income.

Sue Roberts of Somerville, Massachusetts, adds a caveat:

> *Some people I wouldn't want to see do day care because I don't think they're good enough. I would look at their heart and see how they treat other people. If you can't be respectful of other people, then you are certainly not going to respect a kid, who has very little power over you.*

Low-income, less-educated women are as likely to have the personal traits to be good providers as are wealthier or college-educated women. For providers of all backgrounds and income levels, however, personal qualifications are necessary but not sufficient for successful caregiving. Training builds providers' skills and confidence, and participation in networks and associations can help providers resolve problems, cope with challenges, and tap community resources. When supports are available to providers in low-income neighborhoods—offered in the providers' languages, given free of charge, and explained by locally trusted individuals—many caregivers take advantage of the opportunity to develop new skills.

Providers in low-income neighborhoods typically attempt to give the children in their care a reprieve from the poverty and stress they face at home. But they themselves are taking on a responsibility that is demanding, uncertain, and poorly paid. They could benefit from social and financial supports for their child care businesses, but their neighborhoods seldom offer professional opportunities. And many of these providers are uncomfortable attending "mainstream" child care events.

To strengthen the family day care that so many low-income parents need, policymakers and child care experts should extend supports to providers who live and work in low-income areas. The programs that were studied in the NCCP project and are described in the remainder of this report have developed effective ways to achieve this goal in their diverse, economically stressed communities.

PROGRAMS THAT HELP PROVIDERS IN LOW-INCOME NEIGHBORHOODS

Well-funded demonstration projects such as those described in the second chapter illustrate the promise and limitations of innovative ideas; but a great deal can also be learned from organizations in which a family day care focus develops naturally out of ongoing activities, and that must be supported by whatever local funds are available. These are the types of community-oriented programs that the NCCP study focused on.

The information gathered about the 88 programs nominated for the study, and through an in-depth analysis of 10 programs, revealed two major dimensions along which programs for low-income family day care providers differ. The first concerns the type of organization that sponsors the program—its mission, size, and expertise. The second concerns the rationale behind the program's work with providers—the goal that drives the choice of activities and target groups.

This chapter examines how the characteristics of sponsoring organizations and the different rationales for engaging in family day care work influence the nature and impact of programs designed to assist providers in low-income neighborhoods.

Diversity Among Sponsors

The 88 programs nominated for the study were sponsored by a diverse set of organizations. NCCP staff and advisors involved in the study, most of whom have backgrounds in early childhood care and education, expected that the sponsors would include organizations of family day care providers (such as associations and food program networks), resource and referral agencies, and child care programs—especially those with a history of providing subsidized child care in low-income neighborhoods. Staff also assumed that, for the family day care groups and for resource and referral agencies accustomed to working with providers, reaching into the low-income community would represent a new undertaking. These professional groups typically encompass entire communities and are often dominated by middle-class provider and parent interests. By contrast, organizations that sponsor subsidized child care programs typically are familiar with low-income neighborhoods. However, many of these groups operate center-based programs and have not before worked with family day care providers.

As the table below shows, only 21 percent of the 88 nominated programs are housed in organizations that deliver direct child care services. Some are networks or associations of family day care providers; the others operate both center-based child care programs and family day care networks. Child care resource and referral agencies sponsor another 16 percent of the programs. In summary, organizations closely affiliated with the child care profession operate only 37 percent of the programs.

Organizations whose primary purpose is to serve the residents of low-income neighborhoods operate a larger number of the programs. Some 26 percent of the programs are run by community-based

Types of Sponsoring Organizations for 88 Family Day Care Programs Nominated for the Study

Child care service provider	21%
Resource and referral agency	16%
Community-based organization	26%
Social service agency (private)	14%
Public agency or office	8%
Coalitions, voluntary or advocacy groups	8%
Colleges, cooperative extension	7%
Total	100%

Source: Larner, M. & Chaudry, N. (1993). Directory of family day care programs with a low-income focus. *New York, NY: Columbia University School of Public Health, National Center for Children in Poverty.*

organizations—including small tenant organizations, as well as large community action agencies that administer federal poverty programs. Another 14 percent operate within private social service agencies, including settlement houses and church-affiliated service organizations. These types of organizations generally have long-standing connections with the low-income neighborhoods they serve, and they have a good understanding of the concerns and problems faced by neighborhood residents.

Some 8 percent of the 88 programs are sponsored by large public agencies, such as human service or licensing departments, and by offices devoted to child and family interests. Another 8 percent are sponsored by voluntary organizations, child care coalitions, and advocacy groups. Finally, 7 percent are operated by colleges or cooperative extension networks that are the outreach arm of the nation's land-grant universities.

The 10 programs selected for case studies encompass most of these types of sponsoring organizations. Their sponsors include professional child care groups and community organizations, large and small; one program has a public-sector sponsor—the Texas Licensing Division.

A number of the case study programs are housed in hybrid organizations that combine several categories. For instance, Wu Yee Resource and Referral in San Francisco focuses on child care and seeks to increase the availability of center-based and home-based care for the local Asian population. Although its child care identity is strong, the organization was established to serve the needs of low-income immigrants in Chinatown, and it has retained a focus on providers and parents who have a limited command of English. The director explains that the residents of Chinatown use Wu Yee as they would a multipurpose community organization; they call on the staff to tackle a wide range of problems facing community members of all ages.

In another example, the sponsoring organization of Steuben Child Care Project in upstate New York combines the features of a community-based organization focused on the needs of low-income individuals, a child care program, and a public agency. It is operated by a multiservice community action agency that has run the county's Head Start program since 1965. These decades of experience make the agency as much a child care organization as any other, and they also reinforce the agency's ties with low-income community residents. Since the mid-1980s, the organization has expanded its child care involvement with state funding to provide child care resource and referral services. It also works closely with the county department of social services to manage the county's child care subsidy program for low-income families.

Programs Selected as Case Studies

Catholic Charities of MetroEast
Somerville, Massachusetts

Child Care Unlimited
Medford, Oregon

Community Improvement Coalition of Monroe County
Forsyth, Georgia

Foundation Center Family Day Care Networks
Sacramento, California

La Casa de Puerto Rico Hispanic Family Day Care Home Providers Program
Hartford, Connecticut

Louisville Family Day Care Project
Louisville, Kentucky

Neighborhood Child Care Resource Program
Philadelphia, Pennsylvania

Steuben Child Care Project
Bath, New York

Texas Licensing Division
Houston, Texas

Wu Yee Resource and Referral
San Francisco, California

Five of the eight remaining case study programs are sponsored by child care groups (two resource and referral agencies, one public department, and two direct service programs). The others have strong roots in low-income communities and work in many areas in addition to child care. These differences in organizational culture lead the programs to adopt different approaches to reach the shared goal of supporting low-income family day care providers.

Child Care Organizations

The advantages of operating a family day care program in the context of a mainstream child care organization are many and varied. Staff members often have considerable expertise in matters of child care policy and practice; also, regulatory procedures, child care subsidy programs, and the paperwork associated with participating in the Child and Adult Care Food Program are neither mysterious nor intimidating to them. For instance, Child Care Unlimited in rural Medford, Oregon, serves as a food program sponsor for family day care providers. When the agency began placing migrant children who are eligible for state-funded child care in the homes of Spanish-speaking caregivers, staff needed only to translate the forms to include the new providers in the food program. Other groups that want to sponsor the food program must first learn the requirements, develop forms, and master detailed accounting systems—and they sometimes decide it is not worth the effort.

Experienced, mainstream child care groups can be well prepared to provide technical assistance and training to new providers. Often, an organization that operates center-based programs has resources that can be shared with a family day care program. For example, the community action agency that sponsors the Steuben Child Care Project is a Head Start grantee. When a Head Start van was designated as no longer appropriate for transporting children, staff converted it into a mobile resource van to make bimonthly visits to family day care homes and centers across the sparsely populated county. The van's initial inventory of learning materials is enhanced by the science kits, books, and puzzles that Head Start trainers use in Head Start classrooms. Placed in the van between training sessions, they are put to good use by the wider community.

Perhaps most important, a sponsoring organization that has established a place within the child care community gains the opportunity to influence policies, funding, and regulatory guidelines. For example, the Kentucky family day care project is sponsored by Louisville's Community Coordinated Child Care (4C), one of the pioneering child care coordinating councils set up in the early 1970s to improve the supply and quality of child care. This established organization, located in Kentucky's largest city, 4C has played a significant role in shaping child care policy at the state level. Its leaders advocated for the creation of a separate regulatory category for family day care homes in Kentucky, and locally they helped convince city leaders to modify zoning laws concerning family day care homes. Local government representatives said in interviews that they "have become very dependent" on the director and staff of 4C for advice and guidance in matters relating to child care.

A sponsoring organization that has established a place within the child care community gains the opportunity to influence policies, funding, and regulatory guidelines.

On the other hand, leadership within the child care community can also prevent a sponsoring organization from forging close connections within the low-income community. A downtown office location, for example, may limit an organization's ability to effectively train caregivers in low-income neighborhoods—where public transportation is inefficient or unavailable.

Many professional groups, such as resource and referral agencies and provider associations, work only with regulated providers, who are not very prevalent in low-income neighborhoods. As a result, these organizations may have limited contact with low-income families and the caregivers who serve them—especially in neighborhoods in which English is not the dominant language. Moreover, those agencies with predominantly middle- or upper-income clienteles may not have staff members whose ethnic or cultural backgrounds match those of low-income families or providers.

Sometimes an organization is known for taking political stands on issues related to quality, and it might lack the flexibility and empathy needed to work effectively with low-income providers. These providers must sometimes care for children in crowded, poorly equipped, or unsafe homes, and must cover considerable distance before they can attain the high standards set by the child care profession.

Mary Lamer

Some of the child care programs working in low-income communities help parents locate family day care homes in their neighborhood by sharing lists of regulated providers' names—as in Medford, Oregon.

Community-Based Organizations

Community-based groups bring sharply different strengths and limitations to a family day care project than do recognized child care organizations. Several of the programs in the NCCP study are operated by small, neighborhood organizations established by local residents or leaders to tackle the varied problems that face a low-income neighborhood. For instance, the Georgia family day care network is run singlehandedly by Annette Lucear, the director of an organization focused on improving housing conditions for the poor population of one rural town and the surrounding area. She shares a history of personal hardships with the town's low-income residents, but she is committed to working constructively with the local government and leadership to bring about change. The family day care program is seen in the community as the work of that one individual, and it benefits from her reputation among poor residents and local leaders for service, integrity, respect, and honesty.

Some community organizations are larger, such as the community action agency in New York that runs the Steuben Child Care Project, which is one of over 60 agency programs that assist low-income individuals. In Connecticut, the family day care program is a small but successful part of La Casa de Puerto Rico, a large organization dedicated to promoting equity and opportunity for the Latino community in Hartford. Both of these organizations are well known in the low-income neighborhoods they serve. They can easily reach members of the community—parents, providers, and informal caregivers alike—and they are trusted by most local residents. Moreover, these organizations are prepared to offer information and services that are tailored to the culture, needs, and concerns of community members. As Gladys Rivera, the coordinator of La Casa's family day care program, says, "You have to deal with people's real problems. If you just limit yourself to the role that's described on paper, you probably won't be successful at all."

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The primary problem community-based organizations face is that they often find it difficult to take advantage of the knowledge, expertise, and resources of the mainstream child care community. For instance, when Annette Lucear, the director of the Georgia program, began her work with the Child and Adult Care Food Program, she knew no more about child care or nutrition than her providers did. The Georgia Department of Education, which oversees the food program, holds mandatory training sessions on nutrition and food program procedures for sponsoring organizations, and Lucear became a very attentive student at the yearly trainings. She was determined to understand all of the instructions so she can share them with the providers with whom she works. Unfortunately, there is no similar program to keep Lucear informed about the child care practices that promote children's cognitive and social development. On her visits to providers' homes, she addresses mainly nutrition issues.

In one program nominated, more serious problems occurred, which were rooted in unfamiliarity with the child care system. This neighborhood group's primary mission was to address the concerns of residents of a public housing project. The organization embarked on an ambitious program to assist welfare recipients in public housing to become licensed family day care providers. The providers moved into specially designed apartments, attended training, and received stipends through the welfare reform program. They gained experience by caring for the children of other housing project residents who were eligible for child care subsidies. However, the organization's leaders were mistaken in their belief that the subsidy payments could go to support the program's administrative costs; they later learned that the state required the payments to go directly to providers. (The welfare department records these payments as income, so the providers risked becoming ineligible for welfare.)

This type of error was understandable because child care subsidy programs are exceedingly complex, especially to those who are unfamiliar with child care policy. But it obliged the sponsoring organization to turn away from family day care to open a center instead. More consultation with child care experts during the planning stage would have saved the organization and the trainees considerable frustration.

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The Need for Partnerships

The problems faced by broad-based child care organizations that are now reaching into low-income neighborhoods, and also by community groups that have not worked in child care previously, testify to the wide gap that separates the two worlds. The fact that the two groups' expertise does not overlap is not as problematic as the fragile connection between them. Each group is aware of its strengths, and it may sometimes overlook the importance of what it lacks in terms of expertise or relationships.

Experienced child care organizations, for instance, often believe that their professional credibility is a sufficient drawing card when they make overtures to residents of low-income neighborhoods. They are surprised when few people respond. Another route would be to forge partnerships with churches or community groups that have better rapport with community members. On the other hand, grass-roots community organizations are often accustomed to finding their way with little help or guidance from established professionals. In communities where class or ethnic tensions run high, neighborhood groups may be reluctant to trust outside organizations to work with them constructively, without taking over control or being unduly critical. A defensive stance can cut off the organization's access to professional advice and expertise.

"Hybrid" programs generally benefit from their ability to combine the strengths of both types of sponsoring organizations. In some cases, the organization itself has one foot in each world. In other cases, the program director builds on personal experience or ties to ensure that both types of expertise serve the family day care program. Partnerships between child care experts and groups with strong relationships within the low-income community are critical—and are essential to the success of initiatives similar to those described in this report.

Program Activities in 88 Family Day Care Programs Nominated for the Study

Encouragement for regulation	
Orientation and individual assistance	56%
Loans or grants for home improvements	28%
Translation assistance	17%
Training and professional assistance	
Training	97%
Toy and equipment loans	51%
Access to an early childhood specialist	42%
Supports for long-term success	
Referrals of parents seeking care	60%
Child and Adult Care Food Program	47%
Peer support	61%

Note: Most programs offer more than one support service.

Source: Larner, M. & Chaudry, N. (1993). Directory of family day care programs with a low-income focus. *New York, NY: Columbia University School of Public Health, National Center for Children in Poverty.*

Defining the Problem

The NCCP study revealed that the basic building blocks of programs to develop family day care resources are fairly standard, although they may be used and combined in ways that reflect the sponsoring organization's mission and strengths. Some program activities focus on helping providers become regulated—by offering loans or grants, assisting with the regulatory process, or translating information into other languages. Others emphasize training and quality improvement through toy and equipment loans, home visits, or contact with an early childhood specialist, a social worker, or a nurse. Many programs also offer ongoing supports to help providers succeed and remain in business. These include referrals of parents seeking child care, access to the food program, and opportunities to get together with peers.

The table at the left shows what proportion of the 88 nominated programs offer each type of support. Training is the most prevalent activity. Nearly all the programs offer some training to providers. More than half the programs include opportunities to get together with peers, referrals of parents seeking care, assistance with the regulatory process, and toy lending. Somewhat fewer than half offer food program access and contact with an early childhood specialist. Financial assistance (loans or grants) and translation assistance are the least common activities.

Most programs provide many of these components to some extent. It is the program's mix of activities that reflects its character. The mix shows the program's choice of a particular family day care problem to remedy, and its assessment of a sponsoring organization's skills.

Programs have four primary aims for working with providers. These are the organizing principles that drive the selections they make among activities:

- To expand the supply of child care in a neighborhood.
- To help individuals enter the family day care occupation.
- To support existing providers and help them improve the quality of their programs.
- To organize child care for specific children by working closely with selected providers.

The relative emphasis placed on these broad goals leads programs to assemble distinctive sets of services or support activities, and to focus their efforts on particular categories of family day care providers.

Expanding the Supply of Care

Many family day care programs seek to recruit new providers who will offer regulated child care in low-income neighborhoods. These programs benefit two groups—low-income families who seek regulated child care and individuals interested in entering the family day care occupation. Here most adapt the general recruitment model developed by the California Child Care Initiative Project and other groups working in middle-class communities.

These projects often begin with outreach into the community, to alert potential caregivers to the advantages of becoming regulated family day care providers. Outreach takes different forms, depending on the strengths of the sponsoring organization and its assessment of how best to reach people in its community. Several of the programs in the NCCP study serve non–English-speaking communities, and their outreach strategies are similar. La Casa de Puerto Rico in Hartford targets a Spanish-speaking population; Wu Yee Resource and Referral in San Francisco works with the Asian community. Both use newspapers and radio stations extensively to reach their audiences. Program staff provide short articles about family day care, announce meetings or training opportunities, and participate in talk shows. Other programs, lacking these media outlets, disseminate information in low-income neighborhoods by placing fliers and brochures in grocery stores, laundries, and clinics.

In low-income neighborhoods, whenever organizations launch provider recruitment campaigns, staff must work harder than in middle-income areas to help prospective caregivers learn about and meet regulatory requirements. The problem is not that providers do not take regulations seriously. Residents of low-income neighborhoods who rent their homes are concerned about complying with legal requirements, but the requirements are frequently difficult to understand.

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Often, program staff arrange to visit each potential provider's home to ascertain whether the environment is likely to pass relevant inspections.

State guidelines that regulate child care are seldom written in easily understandable English or translated into other languages. Many programs hold orientation sessions for interested individuals, independently or in conjunction with regulatory authorities, to explain what regulation is, what it requires, and how it works. Often, program staff arrange to visit each potential provider's home to ascertain whether the environment is likely to pass relevant inspections. They then suggest necessary changes or improvements.

The simple act of putting "a local face" on a bureaucratic regulatory process can make a significant difference in encouraging providers to respond. The Steuben Child Care Project in upstate New York worked on the county's behalf to certify family day care homes as eligible to receive public child care subsidy funds. A staff member who was once a family day care provider held information sessions and followed up with home visits to the providers' homes.

One provider said to her, "I have to tell you, you're a different person than I expected. I thought you'd be all involved with inspecting, but you're a regular person!" A county official made the final inspection and approval, but the project staff member accompanied the official into the home to make the provider comfortable and to facilitate communication.

There are times, however, when humanizing the regulatory process does not bring down barriers. Policy changes may be required to address costly requirements, or to modify procedures. Until recently, Kentucky held family day care providers to the same licensing standards established for child care centers, entailing separate inspections by state officials, building engineers, and fire marshals. Louisville zoning rules obliged providers to pay hundreds of dollars for an occupancy permit and to secure approval for the business from neighbors up to five houses away. These conditions were improved when the Louisville 4C and other advocates worked with the state legislature to develop a less-burdensome certification system for providers who care for fewer than six children. They also convinced local officials to modify zoning restrictions.

Mary Lerner

Many low-income providers of child care can fix their homes to pass safety inspections, but to begin the process, they need the encouragement and technical help that a sympathetic outside agency provides.

The most important difference between recruitment campaigns in middle-income and low-income neighborhoods is that low-income providers lack the financial resources that may be required to become regulated. Programs able to lend or give potential providers the money to install required equipment (such as radiator covers, smoke detectors, or window guards), to purchase gates for staircases and doorways, or to make more fundamental home improvements are exceedingly valuable to low-income providers. Commonly, programs send out staff to explain to interested individuals how much money could be available to them to prepare their homes for child care. They then negotiate the specific purchases each potential caregiver will make.

Low-income providers are understandably more willing to take advantage of grants than of loans. One program offered no-interest loans of several hundred dollars to providers, but the offer produced little response. Staff learned that providers were unwilling to assume a debt that they feared they would be unable to pay.

In Georgia, one small federal grant enabled the Community Improvement Coalition of Monroe County to assist 13 poor homeowners. These individuals were interested in becoming family day care providers, but their homes needed repairs to meet licensing standards. The grant paid for significant improvements—repairs in flooring and replacement of screens, installation of water heaters and stainless steel sinks, and the purchase of fire extinguishers—which made the homes licensable and safe for children. Once this grant was exhausted, however, the program could not help other individuals become regulated family day care providers. When financial resources are the barrier, only sustained funds can make the difference. Onetime infusions of money have an important—but limited—impact.

Presenting Family Day Care as an Employment Option

Some controversy has developed around the idea of presenting family day care as an employment option for low-income individuals (primarily women). Some advocates of welfare reform suggest that certain welfare recipients work to "earn" their welfare checks by providing child care to other welfare recipients who are enrolled in education or seeking employment. However, the experience of several demonstration programs has indicated that the limited income potential of family day care makes this a questionable career choice for many. It is especially difficult for single women with young children, for whom health insurance is a crucial job benefit. Family day care does not give the provider or her family access to insurance.

The leaders of the programs studied address this issue in differing ways. One of the nominated programs developed a model to train welfare recipients for careers in day care. The director of the program argues that "the ideal for many of us is to run our own business." The public official who recruits participants for that training program agrees; her clients prefer the prospect of family day care to that of working in a child care center. "Center work is attractive to our clients only if they can plan on going into management," she says.

The program's leaders see the training as valuable even if the new providers continue to receive welfare, because the work experience strengthens their skills and confidence. They learned, however, that family day care is not a reliable pathway off of welfare.

Family day care providers' potential earnings are affected by the limited incomes of the families who need their services. Families who are middle-class seldom seek child care in poorer neighborhoods than their own, so providers in housing projects or poor areas have to plan to serve only those families who live in the neighborhood. And even then the demand is modest. Many residents of housing projects do not need child care because they are not enrolled in training or employed outside the home. Those who receive subsidies to pay for child care often look for care in better neighborhoods.

A representative of an employment and training office comments:

> *The people in the projects want "better" for their children than they can provide. They want to see their children go to more upscale child care. They may see the family day care home in the project as "just another welfare person right here," not as a chance to get the child out of that project atmosphere.*

If the only clientele a provider can count on is women who receive child care subsidies, the reimbursement rate paid by the public agency determines the provider's income. With the infusion of federal child care funds, these rates have risen in many states, but they still fall short of assuring a living wage to the family day care provider in most states. An observer in a state with low reimbursement rates states flatly, "You are lying to people if you lead them to believe that in a low-income community, you can make a living doing family day care. Under the present funding system, it is just not so."

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Family day care providers' potential earnings are affected by the limited incomes of the families who need their services.

Despite the prospects, some low-income individuals are drawn to family day care. A growing number of programs that work with providers in poor neighborhoods offer orientation and training sessions that simply present factual information about family day care. This way, individuals can decide for themselves whether it is what they want to do. At information sessions held by Wu Yee Resource and Referral in San Francisco, Margaret Leung, the family day care coordinator, explains the rigors of licensing and how much money providers are likely to earn in specific neighborhoods. She also shows a map of the city, with pins marking the locations of all the licensed caregivers who constitute the competition. She does not try to convince anyone or make any promises. Wu Yee, like other programs, offers plenty of assistance to those who decide they want to pursue this type of work. Program staff may also help providers reconsider their decision if their efforts do not work out as they expected.

Helping Existing Providers Succeed

Some family day care programs, rather than recruiting new providers, focus their energies on supporting those providers already caring for children. These programs aim to improve quality and reduce turnover among providers, by maintaining contact with them over time. They offer training and help resolve problems, and they link the providers to resources and to one another. The supports they offer, which promote the longevity of a provider's business, include peer support groups, home visits, access to federal Child and Adult Care Food Program reimbursements, parent referrals, and subsidies for the care of low-income children.

Training plays an important role in almost all family day care programs, whether it is offered as a basic course for new providers or designed to be ongoing and to meet the needs of experienced providers. Programs that work with a defined group of providers in a network typically hold training sessions every month or two; others hold them less often. The topics of the training workshops vary, ranging from children's development and communication with parents to more business-oriented aspects of child care—helping providers with marketing, developing contracts and policies, record keeping, and taxes.

In many ways, training for low-income providers resembles training for providers in middle-class communities. What differs is the way the content and presentation of the training program are tailored for the audience—put into their language, literally and figuratively. Four of the case study programs make training available in languages other than English. Three arrange the training themselves, employing native speakers as trainers.

For example, a bilingual elementary teacher leads the child development portion of La Casa de Puerto Rico's training program in Hartford. The teacher explains, "This, I do for my people." The director of the Child Care Unlimited program in Oregon, which places migrant children in the homes of family day care providers who were once migrants, has accompanied Spanish-speaking providers to a special training course held at the local community college, and translated for them. Several groups adapt training so that it is culturally relevant to the providers; they link traditional values and practices to principles of good child care.

Toy and equipment libraries are valuable supports to providers in low-income communities. These caregivers often lack the resources to purchase learning materials. Providers who can borrow a playhouse or climbing structure for a month, then exchange it for an easel or tricycle, can offer varied experiences to the children in their care without investing hundreds of dollars in toys. In the Neighborhood Child Care Resource Program in Philadelphia, an early childhood specialist visits providers' homes to suggest ways to use the materials that are available on loan. The Steuben Child Care Project's resource library, which arrives at providers' rural homes in a van, is a type of service important to low-income providers. These individuals work long hours with children, and they may lack the time and transportation to get to program headquarters themselves.

Another way a program can address the resource limitations of providers is by linking them to parents who need child care. The importance of referrals to providers in low-income neighborhoods cannot be underestimated. While many of these caregivers begin serving the children of relatives or friends, the turnover among children in family day care homes is great, and providers have frequent vacancies, which lead to reduced incomes.

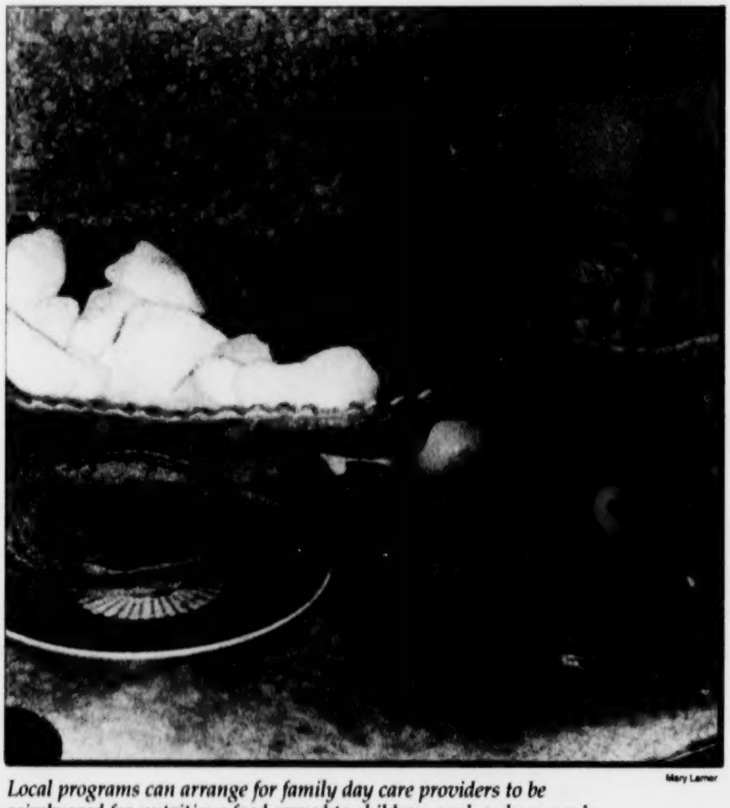
Referral programs that focus on low-income neighborhoods are valued by providers. Low-income providers sometimes have negative experiences when they list their names with citywide referral agencies; they may be rejected by better-off parents who find low-income homes and neighborhoods not suitable for their needs. A referral program that can link eligible parents to child care subsidies is especially helpful. Although subsidy reimbursements are often delayed, providers can at least trust that payment will eventually be made for the care they give.

The Child and Adult Care Food Program, funded through the U.S. Department of Agriculture, may be the most important vehicle available to support low-income providers and to help them improve the quality of their child care. In its design, the program combines resources, education, and accountability. Providers receive a standard rate for the meals they serve children whenever the meals meet nutritional guidelines. (In 1992, the reimbursement amounted to over $2 per child each day for breakfast, lunch, and a snack.)

Providers also attend education sessions focused on nutrition, and they agree to monitoring visits by sponsoring organization staff. To participate in the program, however, providers must be regulated by their state. For this reason, relatively few low-income providers participate or join in the food program.

The experience of the programs included in the NCCP study indicates that outreach, financial assistance, and individual attention can work together to bring providers in poor neighborhoods into the program. However, the food program paperwork required of providers is demanding: daily records of menus served and attendance counts of children must be submitted for approval and eventual reimbursement. For providers who may not be confident of their math and literacy skills, the tasks can be daunting. High error rates result, and the sponsoring organization must find and correct mistakes so that the entire program will not be jeopardized.

The groups that work with non–English-speaking providers face a great challenge. They translate food program guidelines for providers, and they translate the providers' reports for the food program authorities. Many also help determine which favored foods in the provider's culture have the required nutritional content. Some sponsors have developed standard menu checklists of traditional foods; here, the providers can check off what they have served and mark any substitutions they have made.



Mary Lerner

Local programs can arrange for family day care providers to be reimbursed for nutritious food served to children, such as homemade tortillas, through the U.S. Department of Agriculture's Child and Adult Care Food Program.

Although working with family day care providers who face educational and linguistic challenges can be burdensome for a conscientious food program sponsor, the federal food program has become a crucial way to support and maintain contact with providers who work independently throughout the community. It is one of the only mechanisms that reduce the providers' financial burden of caregiving without further pressing parents or limited child care subsidy systems. In rural Georgia, where providers often charge $35 a week for child care, a provider who serves six children full-time earns about $850 a month in fees. If she participates in the food program, and serves nutritious meals, she can receive a food program reimbursement check of over $300 each month.

The federal food program has become a crucial way to support and maintain contact with providers who work independently throughout the community.

The federal food program requires routine visits to the home, and these visits become key vehicles for provider support, technical assistance, and training. Providers usually accept the monitoring visits as a reasonable requirement. One Kentucky caregiver says of the staff who visited to observe during a meal, "They are just doing their job, and I'm getting paid through the program. It's quite a bit of money coming in." This is another area where the local face of the program makes a significant difference. A Georgia provider welcomed the sponsor of her program, but she had a different reaction to a state supervisor, who she felt treated her rudely:

> *I love Annette, but that [other] lady—I had no idea where she was coming from! I realized she had a job to do, but coming into people's homes and trying to cross-examine you like you're on trial. . . . I was about to cry, because I was frightened, and mad.*

For the most part, however, providers welcome these home visits. They provide the caregivers a chance to discuss their work with an interested professional.

Finally, another critical source of ongoing support for providers comes through family day care provider associations. These groups offer contact with peers, a sense of inclusion, and a chance to have a political voice. A number of the programs studied in the NCCP project have helped providers in low-income neighborhoods start their own associations. For instance, La Casa de Puerto Rico in Connecticut launched a formal association for Hispanic providers. This is an independent group with elected officers and well-attended monthly meetings. The association is assuming more and more responsibility for its activities, but it still relies heavily on the staff of La Casa as its link to Connecticut's family day care community (where only English is spoken), and to the broader world of child care policy. La Casa staff hope that the association's need for their help will diminish over time as its ties with Anglo providers grow stronger.

To support the development of provider associations, the Texas Licensing Division offers speakers, information packets, and mailing labels to any providers who want to establish an association or support group. The division's director, Cris Ros-Dukler, explains that professional organizations exert peer pressure on providers to maintain high standards of child care. In her view, the nurturing of provider associations enables the public agency to promote quality in family day care homes.

A key benefit that providers derive from associations is the chance to meet and talk together, and to learn about resource and policy developments. These supports can also come through programs with paid staff who bring information and resources to providers' attention, and work with them to plan activities and address problems. For instance, the Philadelphia Neighborhood Child Care Resource Program holds monthly open support group meetings with a facilitator and invited speakers.

One of the providers describes the support group meetings this way:

> *They are trying to help family providers get established and accepted as a business. That is a problem I had and I think a lot of others have—to accept this as a business. The meetings give you a chance to learn from other people who are in the same business. We have at least 10 people that come regularly, so we all got a chance to know each other. That is how you learn from each other.*

The group is not technically an association—it relies on a paid staff and does not elect leaders—but it offers providers in one low-income neighborhood the same opportunity to forge supportive professional relationships as associations do.

Organizing Care for Specific Children

The most traditional goal that organizations have for working with providers in low-income neighborhoods is to assure that appropriate care is available for children covered by child care subsidy programs. These programs, described earlier as systems, are comprehensive in the range and intensity of the services they offer providers, but they limit their reach to the set number of providers needed to care for the children enrolled in the program. While most other organizations working with providers have only the limited contact with parents and children involved in making a child care referral, in family day care systems, the children and families are the focus of the program.

It is this distinct focus that influences the way systems approach the activities and support components included in most family day care programs. Recruitment is important for these programs, as it is for others, but the aim here is to identify a relatively small number of providers at a time. They want to work with the providers who have the greatest potential to become excellent caregivers. Typically, staff members screen interested individuals to find those who have the skills most important to the program, and who share the program's philosophy. Once the match is made, the system may invest considerable resources in helping that provider become licensed and equipping her home.

For instance, the Foundation Center in California operates center-based and family day care programs that use the Montessori curriculum. The program recruits providers from among the residents of the communities it serves, and it allocates funds to make the home improvements needed for licensing. It then gives each provider up to $2,000 in equipment (such as bookshelves, children's furniture, and specially designed cribs) and Montessori teaching materials. When the sponsoring organization can make this type of capital investment in each family day care home, a low-income home can become a stimulating, rich environment for children.

The most traditional goal that organizations have for working with providers in low-income neighborhoods is to assure that appropriate care is available for children covered by child care subsidy programs.

A provider who participates in a system like this can focus her attention on the needs of the children. The sponsoring agency handles matters like finding and enrolling eligible parents, assigning children to the home, and managing the financial arrangements with the state subsidy program and with the parents, who often pay on sliding-fee scales. The program pays the provider, either as a contractor who earns an agreed-on sum per child and per day or hour, or as a salaried employee. The agency keeps track of the payments, making it easier for the provider to report her income on yearly tax forms. Some providers welcome this type of arrangement, which provides freedom from worry about business matters. Others prefer to work independently, managing their own time and making their own decisions about whom to serve, how to deliver care, and how much to charge.

Most systems train their own caregivers. They use regular home visits by early childhood specialists or social workers to build on group training sessions. In Somerville, Massachusetts, Catholic Charities of MetroEast assigns a home visitor to each provider. The visitor is responsible for assisting that provider and attending to the special needs of the children placed in that home. In addition, the visitor is available to help solve problems—for example, if the provider is worried about a child's unusual behavior, or becomes disturbed when a parent picks up a child late; or if a parent neglects to give the child a bath or a good breakfast.

These are the dilemmas that trouble independent providers the most, and the assistance of a colleague who has both time to talk and connections to other professionals can be valuable. This type of support is especially important in the many systems that serve a high proportion of children referred because of abuse and neglect.

Mary Lerner

Many local programs link children receiving family day care in low-income neighborhoods with services such as health care.

Family day care systems' focus, on offering the best possible care to the children enrolled, can be at odds with their efforts to support the development of the providers. This is most evident in discussions about the rate of compensation that providers will receive. For instance, Child Care Unlimited, in Medford, Oregon, receives a set allocation from the state department of social services to serve the children of migrant farmworkers. The amount is based on the estimated duration of the harvest season and the estimated number of children who will need care. Each year, Jill Ramirez, the director of Child Care Unlimited, negotiates a payment rate per hour of child care with the providers in her network. Because each year's funds are limited, however, the more the program pays the providers, the smaller the number of children who will be able to receive child care through the program. Ramirez is in the awkward position of balancing the rights of providers to receive good wages against the needs of migrant children to receive care. It is a testimony to the providers' trust in and respect for her that the yearly contract discussion is friendly.

This chapter has emphasized the differences among sponsoring organizations and among the goals that family day care programs pursue in their work with providers. However, the common experiences of these programs are as notable as their differences. The final chapter presents the key principles that the program leaders say account for their success in helping family day care providers meet the needs of the families and children in low-income neighborhoods.

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KEYS TO SUCCESS

The 10 programs selected for the NCCP study have succeeded in reaching family day care providers in low-income neighborhoods through support strategies that the providers use and benefit from. A look across the sponsoring organizations, program goals, and activities suggests four lessons learned about the requirements for success. These findings can guide future efforts to invest funds to expand and improve the supply of family day care serving the nation's poor communities:

- It takes resources—financial and material—to enable low-income providers to offer safe and high quality care in their homes.
- It takes local people who are friendly, familiar, and trustworthy to reach low-income providers and draw them into the program's circle of supports.
- It takes novel cooperative efforts involving child care experts and representatives of low-income communities to develop and implement effective programs that improve child care in poor neighborhoods.
- It takes time for change to occur in public policies, organizational relationships, and human behavior. Building the family day care supply depends on changes in all of these realms.

It Takes Resources

One basic fact is true of all low-income family day care providers. They lack financial resources. As obvious as this statement is, a remarkable number of programs designed to support providers with limited resources fail to address this fundamental need. These providers need help—paying for home improvements, purchasing equipment and learning materials, and sustaining themselves and their families on the inadequate fees that their clients (or subsidy programs) can pay for child care services. However, providing financial assistance is difficult for any human service program, given the tight budget constraints under which they work. Most family day care support programs squeak by on scarcely enough funding to support a staff member or two, and to pay the cost of training, support groups, or home visits.

Financial assistance, when it is available, typically includes loans or grants to help new providers prepare their homes for licensing and for the first six months of operation. For many low-income providers, who do not have the savings needed for capital investments in the new business, access to funds for home rehabilitation or improvements makes the difference between working "underground," unknown to various authorities, and becoming regulated and participating in training, support groups, and other professional activities.

It is also important to identify mechanisms for retaining providers who have become regulated and received training. One way to retain them is to increase their incomes from family day care work. A number of the programs studied help providers stabilize their incomes by providing referrals to families who seek child care. Other programs assume more responsibility and identify children eligible for child care subsidies, place them in family day care homes, and handle the collection of fees and subsidy payments. These services help reduce an individual provider's vulnerability to income loss due to vacant child care spaces or the inability of poor parents to pay the cost of child care.

Other programs help to make family day care financially feasible for providers by reducing the cost of offering good care. The federal Child and Adult Care Food Program does this by reimbursing providers for the food they serve children every day. In addition to the financial reimbursements, the food program provides nutritional guidelines, training sessions, and regular monitoring visits from a sponsoring agency representative. The combination of these elements—resources, training, and oversight—gives the program its unique strength.

In contrast, efforts to help providers give children rich and stimulating experiences can be one-dimensional. Programs offer either small grants or access to training workshops, activities that are valuable and necessary, but weak when offered in isolation. If policymakers were to truly embrace the goal of improving the developmental aspects of family day care, a publicly funded quality enhancement program could be designed along the lines of the successful food program. This type of federal program could reimburse providers for the cost of play and learning materials, and it could offer related training and one-on-one guidance that would develop providers' abilities to serve as teachers, as well as nurturers.

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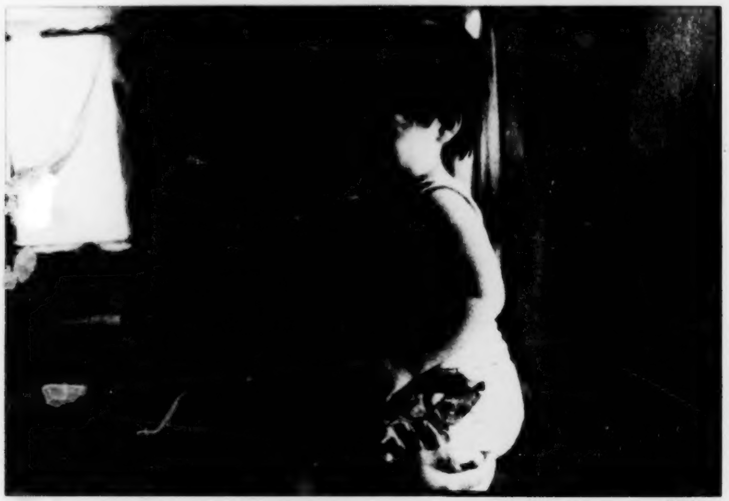
Organizations that seek to contact and support family day care providers of all income levels find that they are most successful when they, too, invest in human contact and one-on-one interactions.



Mary Lerner

Many family day care providers love their work because they love children—despite the long hours and the meager pay available to them in low-income neighborhoods.

It Takes Local People

Family day care is an eminently human enterprise. To a considerable extent, the interplay between the provider and the child resembles the child's interactions with a parent. Likewise, the provider's work bears much in common with her activities with her own family members. Organizations that seek to contact and support family day care providers of all income levels find that they are most successful when they, too, invest in human contact and one-on-one interactions. The coordinator of a family day care network in New York City comments, "The most important thing in any network, I would say, is that you know the people—you know them personally."

The telephone is an essential way to communicate with providers, and many of the programs that assign staff members to answer provider calls during regular hours find that the service is used heavily. Home visits—whether they focus on a child's adjustment, compliance with food program guidelines, or training in new activities or discipline techniques—often mean even more to the caregiver. As one provider told a visitor, "I like it when you come, because I need someone to talk to."

That one-on-one contact is most welcome and effective when it comes from a familiar, friendly person with a background similar to the provider's own. Although a former provider with a fenced yard in the suburbs and a nine-passenger van may be ideal as a trainer for other suburban women, she may not be prepared to work effectively in low-income neighborhoods. Programs must pay attention to identifying staff members who respect and can communicate easily with low-income providers. Only when the providers feel comfortable with the individuals who represent the program will they choose to participate in activities. Once a bond of trust exists, it opens the door to many changes and improvements. The program can become, as one coordinator notes, "a place they can go to get support to grow and do better."

It Takes Cooperation

No single type of organization is uniquely suited to sponsor a program to reach and involve family day care providers in low-income neighborhoods. Both child care organizations and community groups bring their own strengths and limitations to the undertaking. The greatest success can be realized when a strategy draws on the resources of both of these worlds.

Successful programs for low-income family day care providers require new partnerships. Work with family day care providers depends on outreach to adults in the community—reflecting the strength of neighborhood-focused organizations. It also requires an understanding of child care policies and practices. Some effective partnerships come into being because of a program director who has experience and connections in both arenas. Others may be arranged through active reliance on advisory groups or consultants whose expertise complements that of the sponsoring organization. Still others emerge from within hybrid organizations that have experience in both child-oriented services and neighborhood organizing.

To stimulate cooperative efforts, policymakers and private-sector funders should build in to their funding programs the expectation that programs seeking to work with family day care in low-income neighborhoods have ties to both the child care profession and the low-income community.

It Takes Time

Even when resources, people, and partnerships are in place, the supply of good family day care cannot be increased overnight. Three key processes are involved that all take time to develop. First, public policies enforce many of the barriers that keep providers from becoming regulated—and regulation is the first step the provider must take before she can benefit from other professional supports. Many states are revising their approaches to family day care regulation by removing both costly and inappropriate requirements, streamlining procedures for handling applications, and increasing outreach and enforcement. But these reforms take place gradually. They are fostered by patient advocacy efforts that institute one change at a time, review progress, and develop new policy responses to address remaining or new problems.

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Programs seeking to work with family day care in low-income neighborhoods (must) have ties to both the child care profession and the low-income community.

Second, an organization or program has to win the acceptance of caregivers and parents who live in low-income neighborhoods. If an organization has not worked in the community before, a period of skepticism can greet initial efforts. A broad-based organization with credibility in the community can win trust more easily, but families may be slow to recognize that the organization has added child care to its portfolio of services. Moreover, most of the programs studied here have changed their approaches over time in response to their experience in their communities. This type of natural evolution undergirds the strongest programs, but it happens only when continuous funding gives the program the security to grow and change.

Third, individual relationships between providers and program staff have to take root and deepen. Building relationships is one of the most important tasks a program can undertake, and one of the most time-consuming. Much of this work goes on in the provider's home when a staff member goes to help an interested woman decide whether to offer family day care, or to help a new provider prepare for licensing, or to help a veteran caregiver resolve a problem with a parent or child. Not all providers are pleased to welcome a stranger into their homes—until they come to know and trust the visitor.

Getting into the caregiver's home is just the first step. Some aspects of family day care are fairly technical and straightforward—strategies for keeping track of payments, designing a parent contract, or installing safety gates or smoke detectors. However, many of the most important parts of child care concern a caregiver's style of interacting with children and parents. For a visitor to establish a relationship that permits discussions about these issues, and affords the provider enough comfort to bring up her concerns, is difficult but profoundly valuable. These dialogues are the essence of professional support and professional development.

Mary Lerner

Even family day care providers in rural areas benefit from the support of local programs that link them to food assistance funds, help improve their homes, train them, and refer parents to them.

Because time is such an important factor in determining the impact of programs that influence family day care policies and reach and support individual providers, it is critical to develop funding approaches that sustain the operations of local-level programs. Too often, public agencies and private foundations provide funds to support the development of new program models, but they terminate funding after two or three years. The program vanishes from the community even more rapidly than it came into being. As one program director notes, "Just as key relationships are established, the program goes out of business for lack of funding."

Short-term efforts will not suffice to develop a supply of care. Instead, ongoing commitment and investment offer the greatest potential for raising the standard and supply of care in low-income neighborhoods.

Funds, people, cooperation, and time. These are the crucial elements in planning any strategy that sets out to develop and improve family day care in low-income neighborhoods. None of these characteristics are easy to come by, but as the programs studied in this project show, impressive effects can be achieved when elements are combined. The obstacles that providers in poor communities face are significant, but they are not insurmountable, especially when local programs use goodwill, local people, persistence, and ingenuity to support and assist them. The primary beneficiaries of these successful investments are the children. The ripple effects can be felt in the children's families, in the providers' households, and throughout the local community.

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CASE STUDIES

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CATHOLIC CHARITIES OF METROEAST

Somerville, Massachusetts

In Somerville, Massachusetts, a working-class suburb of Boston, a Victorian house on a side street is home to the family day care program of Catholic Charities of MetroEast. The program recruits, trains, and supports women in neighboring towns who provide subsidized child care through a contract between Catholic Charities and the state. This comprehensive family day care system concentrates on the care of low-income children and those experiencing abuse or neglect. Sue Roberts has worked with the program for 18 years. She explains why:

> *I was designed for this job. I love my home, I love my community. I have gained a lot of respect from people I respect. I've done it long enough to see what an effect day care can have on kids from troubled situations.*

The Community

The family day care program run by Catholic Charities of MetroEast has long served Cambridge and Somerville. These are ethnically diverse, densely built residential towns with twisting streets lined with old multifamily homes and three-story apartment buildings that have postage-stamp yards or no green space at all. Cambridge is a university community, but most of the residents of both towns are working-class families with strong ethnic roots, including recent immigrants from Latin America and Southeast Asia.

Single parenting and the strains of urban life make child rearing difficult in these blue-collar neighborhoods. Alcohol use, drug abuse, and domestic violence escalate with economic pressures. Gentrification raises housing costs, forcing wives in traditional families to take jobs. Child care is a crucial support service in these communities, and state subsidies help to make it affordable for low-income families.

Sponsoring Organization

This family day care program operates under the umbrella of a large established Catholic Charities agency that has a long history of community service—arranging foster care placements, serving the elderly, and operating recreation programs. Many Catholic Charities affiliates sponsor family day care systems or manage child care centers that serve children eligible for public subsidies. With funding assured through state contracts, the systems recruit and screen family day care providers, train them, enroll eligible parents and place children in homes, supervise the providers' work, and handle the finances. The Cambridge/Somerville family day care program is atypical because it has a community development focus and it emphasizes career advancement for providers.

Program History

The Cambridge/Somerville family day care program began in 1971 when Pat Cronin, who had a background in the Head Start program and a degree in urban studies, began working in a nearby housing project. She came to believe that helping interested residents provide family day care in their apartments would give them an income and a career, and that this approach would meet the child care needs of other residents, who could then find employment elsewhere.

The program quickly spread beyond the housing project, but it continued to focus on low-income providers and their professional development goals. Its mission is twofold: to provide comprehensive, quality child care to children and families; and to train and support community women who work in child care, raising their self-esteem and encouraging them to consider broader careers in human services.

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The Cambridge/Somerville family day care program is atypical because it has a community development focus and it emphasizes career advancement for providers.

Program Services

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The program's many components join together to maintain a network of high quality homes that will meet the social, emotional, and developmental needs of children from low-income, highly stressed families.

The program's many components join together to maintain a network of high quality homes that will meet the social, emotional, and developmental needs of children from low-income, highly stressed families. In 1992, the program served 130 children eligible for subsidized child care because of low family incomes ("basic" care), 82 children eligible because of child abuse and neglect ("supportive" care), and eight children of teenage parents.

The contract for basic child care pays the program to supervise and operate the family day care homes and a part-day preschool for four-year-olds. The contract for supportive services to highly stressed families includes transportation to child care, the involvement of a social worker, and monthly case conferences. The teenage parent program, funded separately, gives young parents access to family day care, transportation, counseling, and parenting groups. Children covered under these contracts mingle together in the family day care homes, and many of the providers also care for children whose parents pay privately.

The intimacy of family day care is what most parents like about it.

Lorraine Cook

Recruitment. Program staff invest considerable effort in identifying and screening new providers. Current providers or staff recommend most new caregivers, who typically live in the working-class neighborhoods the program serves. Responding to the growing numbers of immigrant families in the area, the program has recruited Spanish-speaking and Haitian providers. If a Catholic Charities home supervisor thinks the recommended individual has the personal qualities needed for the work, she helps her secure a license and arrange her home for child care. The home supervisor makes three visits during the start-up period, to ensure that the provider is well suited for child care.

Training, support, and supervision. Building on a rigorous screening process for new providers, this program invests heavily in caregiver training and supervision. It holds training sessions two evenings a month. Some are for new providers; others take up more advanced topics to interest "veterans" who have attended training sessions for 10 or more years. Separate support group meetings bring together providers to share specific concerns.

The heart of the Catholic Charities program lies in the support and guidance that home supervisors give to the 15–20 providers in their caseloads. Supervisors place children in the homes, visit every two or three weeks, make needed referrals to outside agencies, and maintain files on all the children. This type of supervision is key to the family day care system model, and it develops the skills of the providers. Kerrie Fallon, a home supervisor who began with the program as a provider in the late 1970s, puts it this way:

> *Family day care is an incredibly hard job and an incredibly important job. Most women who can do this and do it well don't realize what a real talent they have. Part of supervision is giving them the technical words that go with actions they have been doing for a long time.*

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When supervisors provide oversight respectfully and supportively, providers appreciate it. Sue Roberts, the 18-year veteran, explains why she stays in the Catholic Charities family day care system rather than striking out on her own:

> *It's knowing the whole world isn't on my shoulders, knowing that there's backup and support, knowing that there is someone I can call. . . . And it's having an established agency like Catholic Charities saying, "You know, you are pretty damn good."*

As authority figures, supervisors mingle oversight with support, and help ensure that the program meets the children's needs. In Fallon's words, "The bottom line is that [the providers] are answerable to me because I am answerable to somebody else, and we all really focus on providing well for a child."

Serving children from stressed homes. A third of the families in this program were referred by a child welfare caseworker because of indications of child abuse or neglect. A range of professionals—such as speech therapists, psychologists, and court investigators—may visit a provider's home to observe a child. Many providers have observed signs of abuse and made the required report to the authorities, with the support of the home supervisor.

Stresses at home often leave children troubled. Some become aggressive, and others withdraw. The Catholic Charities staff members perceive family day care to be well suited to these children's emotional needs. Family day care offers a small setting with consistent routines and expectations, and it allows the children to develop a close bond with the provider. To ensure that strains between providers and parents do not disrupt a child's stay in the provider's home, supervisors work closely with both parties to resolve problems that might make the partnership unworkable. Many children remain with the same family day care provider for five years, from infancy until kindergarten.

The preschool program. To combine the security of a family day care placement with the stimulation and group experience of a center-based program, the program offers a part-day preschool for four-year-olds that operates four days a week in fully equipped classrooms in the Somerville office. Vans transport the children to the preschool from their family day care homes and back. The teachers and providers see their roles as complementary. Most providers feel that exposure to a structured group program will prepare the children for kindergarten. They also value the quieter time they have with the younger children while the preschoolers are away.

Staff development. This family day care program focuses not only on children, but on the professional and personal concerns of the community women it recruits as providers. The training component now offers courses for providers that give credit from the local community college, and it helps providers secure their Child Development Associate (CDA) credentials. A career ladder within the program enables interested providers to move into roles such as preschool teacher, home supervisor, and board member. The program also responds to providers' economic concerns by paying them fairly and by giving them the option of working as full-benefits employees. These staff development measures have made the program remarkably stable. Half the 70 providers in the program are 10-year veterans, and several have been involved for 18 years or more.

In 1992, 10 providers were employees, not contractors. They receive a guaranteed salary of approximately $20,000 to care for six children year-round in their homes. Benefits include paid sick time, paid vacation, health insurance, and a retirement contribution. Some providers choose the employee option because it offers them security and reduces the paperwork associated with running an independent business. Others prefer to keep their status as contractors and to draw children from the private market in addition to those referred by Catholic Charities.

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Family day care offers a small setting with consistent routines and expectations, and it allows the children to develop a close bond with the provider. . . . Many children remain with the same family day care provider for five years, from infancy until kindergarten.

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One supervisor explains: "The nurturing and the one-on-one (experience) that is part of family day care is what makes family day care special."

Project Structure and Funding

The Catholic Charities family day care program model is staff-intensive. It emphasizes support, supervision, and direct work with parents beyond the child care offered by the family day care providers. In 1992, the staff included five home supervisors (some working part-time), four preschool teachers, a recruitment coordinator, a social worker, office staff, and Pat Cronin, the director. Several of the home supervisors have backgrounds in social work, and others are former providers.

This family day care program could not exist in its current form if the state ceased its practice of contracting with community agencies to provide subsidized child care. The contract with the state assures a set level of funding per year, based on the number of children to be served and a negotiated per-child daily payment rate. In 1992, the program received just over $26 per child per day for basic child care, nearly $34 per day for supportive care, and over $44 per day for the children in the teenage parent program. Providers earned approximately $18 per day for their contribution to the care of the children, and the remainder of the funds supported central functions such as supervisor and social worker salaries, training, the preschool program, transportation, and the costs of working directly with parents and caseworkers.

Children from troubled families can benefit from a caregiver's attention.

Lorraine Cook

Challenges and Next Steps

Throughout its 20-year history, the Catholic Charities family day care program has weathered many challenges. Federal child care funds are increasing the use of subsidy vouchers that parents control, instead of the negotiated contracts that have supported this child care program. However, Massachusetts has used scarce state dollars to maintain its child care contracts. By adding private funds and some voucher payments, the Catholic Charities program continues to flourish.

The emphasis in the program's contract with the state has shifted, however. It includes fewer "basic" spaces for low-income parents, and more"supportive" spaces for abused and neglected children. These cases are more challenging for the providers and home supervisors to handle, and a concentration of troubled children in each home can multiply the problems. The program has recently added a social service component to address these challenges. Two full-time social workers now offer parent education and support (in groups and one-on-one) and therapy for stressed children.

The providers and staff of Catholic Charities of MetroEast believe that children from poor or troubled families benefit from the care that well-trained and supported family day care providers give. One supervisor explains: "The nurturing and the one-on-one [experience] that is part of family day care is what makes family day care special." She adds, "The children we see need nurturing very badly."

CHILD CARE UNLIMITED

Medford, Oregon

Medford, Oregon, is the commercial center of a rural county dominated by forests and orchards. It is home to growing numbers of agricultural workers from Mexico and other parts of Latin America. Traditionally, the workers were migrant men who came to the area only during the harvest season. But during the last decade, more whole families have migrated to Medford and struggled to combine work in the fields with raising and educating their children.

In the mid-1970s, stories of children harmed by farm machinery, babies left in baskets at the edge of fields, and toddlers locked all day in sweltering automobiles prompted the state to allocate funds to provide child care for migrant families. In Medford, Child Care Unlimited uses those funds to contract with Latino family day care providers to care for the migrant children in their homes.

Program History

In most communities, child care for the children of migrant workers is center-based, and it began that way in Medford, as well. During the 1970s, a center for 25 migrant children opened each July and then closed three months later, after the harvest season ended. Jill Ramirez, who helped manage the center for several years, was struck by the wastefulness of establishing a center for such a short time. In 1980, she convened a town meeting to discuss the migrant child care question and to propose her idea:

> *If we did not have to pay a bus driver, a cook, three to four teachers, a janitor, liability insurance . . . but tried to contract directly with people who are already involved in day care, then we could avoid many of these costs.*

Ramirez proposed that a new program, relying on the area's already active family day care providers, would require administrative funding for only one staff person and an office. This approach would stretch state funds so that more migrant children could be served. The Fruit Growers League, which represented the area's 20–25 growers, supported the idea and gave Ramirez free office space. With this support, she began to place migrant children in Medford's registered family day care homes, which at the time were operated by middle-class, English-speaking providers. By 1985, she had established Child Care Unlimited and moved into a larger office in town.

More innovations followed. By the mid-1980s, more migrant families were settling down in the area year-round, although they still worked in agriculture. The state tightened the eligibility requirements for the migrant child care program: now it would serve only the children who had traveled with the family for at least two months during the previous year. These changes left Child Care Unlimited unable to provide child care to about half the farmworker families who applied to the program in 1990.

Not wanting to turn away the families who had "settled out" of the migrant way of life, Ramirez asked the mothers whether they would work as caregivers for the children of migrant families. They could earn a modest income, and it would give the children a child care environment that would be culturally and linguistically similar to what they experience at home.

As one of the Child Care Unlimited staff members, Lilia Caballero, puts it: "We like to place the kids where they won't see a difference in the language and the meals—especially the migrant children, whose lives are so disrupted as it is." Many of the 50 homes where Child Care Unlimited now places over 100 farmworker children each year are registered family day care businesses operated by former migrants who have settled in the Medford area.

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Many of the 50 homes where Child Care Unlimited now places over 100 farmworker children each year are registered family day care businesses operated by former migrants.

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At times, Child Care Unlimited must turn away families, aware that parents may have to leave four or five young children at home in the care of a nine-year-old.

The Community

Medford is a busy town of over 35,000 inhabitants nestled in the Rogue River valley in rural southwestern Oregon. The town is a haphazard mix of residential and business areas, where office buildings and timber yards adjoin an interstate highway, shopping mall, and airport. Outside town, the houses give way to sprawling buildings where fruit is sorted and packed into gift boxes, and then to 9,800 acres of fruit orchards. As in many rural areas, family day care is a prevalent form of child care in and around Medford. The county surrounding Medford boasts over 500 providers who have registered with the state, and there are probably two or three times as many unregistered caregivers.

In the harvest season, the area's fruit growers turn first to young male agricultural laborers. More and more families have joined the migrant labor force, however, and women also work in the fields. The annual arrival of families with children poses serious housing and child care challenges. Some migrant families live in grower-supplied housing near the fields where they work. Others crowd together in small cinderblock houses in an area called Little Mexico, or share living quarters in other parts of town. Growers in the Medford area are quick to refer families with children to the Child Care Unlimited child care program. Ramirez explains:

> *Luckily, we have a good rapport with the farm growers. They really will not allow babies in the field or in hot cars. They are really good about saying, "You get over there to Jill Ramirez, and you talk to her about child care."*

Unfortunately, Oregon's funds for migrant child care are often not enough to cover all eligible families for the entire harvest season. At times, Child Care Unlimited must turn away families, aware that parents may have to leave four or five young children at home in the care of a nine-year-old.

Mary Lerner

The orchards near Medford, Oregon, attract migrant families who come each year to harvest the crop. They need child care while they work.

Sponsoring Organization

Child Care Unlimited is a private, nonprofit organization established in 1985 to work with the children and child care providers in Jackson County and adjacent Josephine County. It is funded through child care programs for the children of migrant and settled agricultural workers, and through a federal Child and Adult Care Food Program sponsorship. Although Child Care Unlimited conducts its activities independently, its migrant child care program operates under the umbrella of the statewide Migrant and Indian Coalition. This coalition receives funds from the Oregon Children's Services Division and the federal Head Start program to serve migrant children in 15 programs across the state.

Child Care Unlimited has a staff of five, including a Spanish-speaking summer volunteer who helps with the stream of farmworker parents seeking child care. It is one of two food program sponsors in the area, and is the only one serving both English- and Spanish-speaking providers. The organization relies on the food program sponsorship for administrative funds to sustain operations throughout the year, and that work keeps the staff in touch with the entire child care community.

The organization's migrant child care program depends on a yearly contract with the Oregon Children's Services Division. Child Care Unlimited's 1991 allocation served 90 children. The Fruit Growers League donates a modest amount each month to cover the organization's expenses or to extend child care coverage when the state funds are not sufficient. In 1992, a foundation grant enabled Child Care Unlimited to provide child care to settled farmworker families, in addition to those who were eligible for migrant child care.

The Family Day Care Effort

Child Care Unlimited's energies are directed primarily toward the Spanish-speaking providers who come forward each summer to care for migrant children. The program helps providers register with the state as family day care providers, places children and pays for the child care, enables providers to join the federal food program, and encourages them to improve the quality of the care they provide by taking advantage of resources and training opportunities. Much of the agency's extensive assistance to the providers is unfunded and demanding for the staff, but Ramirez sees it as an investment in the Latino community. She believes that "former migrant" providers are ideal caregivers for the children who live in migrant Latino families. The program is "a circular thing" that enables her to contract with members of the migrant community to provide a much-needed service to the families and children around them.

Registration assistance. Participation in the program begins, in most instances, when Ramirez or her colleague Lilia Caballero suggests to a woman in the migrant community who has settled in Medford that she consider becoming a family day care provider. Most of the providers are married and have several children of their own; almost two-thirds are monolingual Spanish speakers, for whom few employment opportunities exist outside agriculture. Because Oregon registers family day care homes with no home inspections, requiring only a completed application and a criminal record check, it is not difficult for an interested individual to become a provider. Child Care Unlimited has translated the registration forms and state orientation materials, enabling Spanish-speaking individuals to understand the information presented at the required orientation session.

Placement of migrant children. At the heart of the program is an effort to place migrant children in the homes of providers who share the family's language and who understand the culture and pressures of migrant life. The migrant families arrive in the area in July or August and visit the Child Care Unlimited office to seek assistance with child care. Only then do the staff learn how many children they will be trying to place in family day care homes. In preparation for each season, Ramirez holds a meeting with the 50 providers to discuss the terms of the annual contract that each provider will sign. Providers care for two or three children, on average, and receive payment at an hourly rate (in 1992, $1.50 for infants and $1.25 for children over 30 months of age). An hourly rate is important because the migrant parents work long and irregular hours. The provider's day may begin at 5:00 A.M. and not end until 6:00 P.M. Ramirez receives a set allocation from the state Children's Services Division, so she has to negotiate the hourly rate. This is a balancing act for her:

> *I think the providers should be paid a lot more. I know, on the other hand, that paying them a lot means we go through our allocation that much faster. . . . We talk about it, and come up with something that is fair and equitable for everybody involved.*

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The program helps providers register with the state as family day care providers, places children and pays for the child care, enables providers to join the federal food program, and encourages them to improve the quality of the care they provide.

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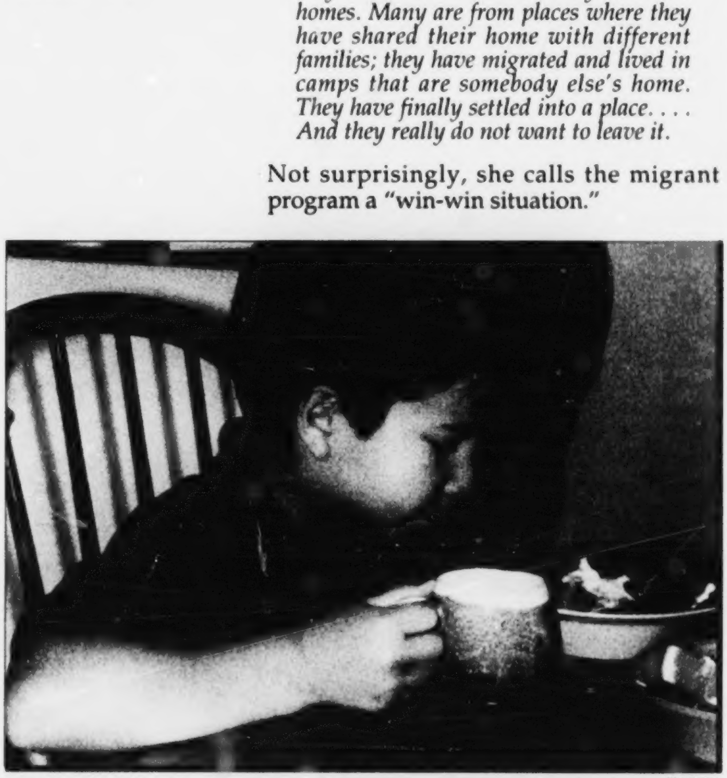
Another benefit of the program . . . is the nutrition education each provider receives: "Whatever she learns, she will have the rest of her life."

Child Care Unlimited places migrant children with Spanish-speaking providers for two reasons: to offer cultural continuity to the children, and to direct as much financial support as possible to former migrants. Most of the providers have husbands still involved with agriculture, and they see the income as a supplement to the family's economy. The migrant child care program lasts for only a few months each year, but about 20 providers have recruited private-paying parents who work all year and use child care year-round. Some providers return to Mexico during the winter months, take odd jobs, or remain at home with their children. These former migrants find it valuable to have a way to bring in some income while working at home. As Ramirez explains:

> *The beauty of what is happening is that they want to be at home. They like their homes. Many are from places where they have shared their home with different families; they have migrated and lived in camps that are somebody else's home. They have finally settled into a place. . . . And they really do not want to leave it.*

Not surprisingly, she calls the migrant program a "win-win situation."



Mary Larner

Children receiving family day care in low-income neighborhoods frequently benefit from federally funded nutritious lunches.

The food program. The vast majority of the area's registered family day care providers participate in the Child and Adult Care Food Program. (The state official responsible for family day care in southwest Oregon has estimated a 90 percent enrollment rate for this community.) Because of the efforts of Child Care Unlimited, the Spanish-speaking caregivers are just as active as others. This program is especially beneficial to the Latino community because most of the providers have young children at home and earn so little that they can claim government payment for the meals they serve their own children, as well as the day care children. Another benefit of the program, in the eyes of Caballero, who monitors the meal service and the claim forms, is the nutrition education each provider receives: "Whatever she learns, she will have the rest of her life."

Operating a food program for these providers is a challenge. Many lack English-language skills, having received only limited formal education in Mexico before they joined the migrant stream. Ramirez describes the work this way:

> *The concepts of food groups, vitamins, minerals, and fat content are just foreign to them. Writing is hard for them sometimes. Each and every form, the newsletter, any notices going out, and meetings coming up—all have to be translated.*

The food program does not compensate the program for the extra work, however. Child Care Unlimited receives the same basic fee per home as sponsors that serve more advantaged, English-speaking providers—those who need no assistance to meet the program's requirements.

Training. In 1989 and 1990, Child Care Unlimited made it possible for the Spanish-speaking providers to participate in a Rogue Community College training course. Offered as part of the Family-to-Family program, funded by Mervyn's and the Dayton Hudson Foundation, the course covered topics such as child development and activities for children, as well as business topics like writing contracts for parents and paying taxes.

When Ramirez learned that the training was being planned and that her providers were interested, she offered to act as an interpreter to translate during the class so that Spanish-speaking providers could participate. The instructor agreed to teach each class twice, once for the English-speaking providers and once for translation into Spanish. Arranging the translation was only half the battle, however. While the providers were eager to attend, many of their husbands resisted the idea that their wives would leave the family in the evening. Also, transportation was a problem because few of the women were licensed drivers. Ramirez, a well-known figure in the migrant community, visited the concerned husbands and won most of them over, especially when she offered to drive the women to and from the class herself.

During the second year, the Family-to-Family program offered an advanced course taught by a Spanish-speaking instructor. The providers attended, and this time there was no need to intervene with husbands or to make travel arrangements for the attendees. Ramirez was not surprised. "All you need is for someone to get [these women] turned on. The rest they'll do the next time themselves. Once they see they can do it on their own, they're okay." Participation in the training also carried community college credit—a source of pride to the providers.

Other supports. Class meetings led the Latino providers to form their own association. They met after the course ended and identified priority areas for more training—managing tax forms and learning how to obtain driver's licenses. Workshops on both topics were held, but without the structure of the classes, attendance lapsed. Once the harvest season arrived, the providers were busy with the day care children for 11–12 hours per day, and were reluctant to come out in the evening. Nevertheless, the new friendships persisted, and the providers began to turn to one another for support with their work.

Finally, with a little urging from Child Care Unlimited, several providers were able to win small state grants (approximately $600 each) to invest in improving the quality of their child care homes. Ramirez noticed the state's request for proposals, and she brought the opportunity to the attention of the Latino providers. The staff helped them prepare applications and then translated them into English. Five out of 10 applications from the group were rewarded with grants. This was yet another way for Child Care Unlimited to link the providers with outside resources and to help them demonstrate their growing professional skills.

Challenges and Next Steps

Child Care Unlimited has succeeded in bringing together migrant children with family day care providers whose own lives prepare them to offer care that is consistent with the child's experiences at home. State funds not only have placed the children of farmworkers in safe and nurturing environments, but also have helped members of the migrant community to launch new careers as family day care providers. Not all of these providers see themselves as developing professionals, but many do. Several completed the community college training courses, and some have sought clients in the English-speaking community who can pay privately for child care all year long. In 1993, Child Care Unlimited received funding to offer more training in Spanish to the providers; some 30–50 of the Latino caregivers attended classes on first aid, health, child development, and tax preparation.

The Migrant and Indian Coalition has urged Ramirez to consider the initiation of a center-based Head Start program, as well. Although she believes a group program

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State funds not only have placed the children of farmworkers in safe and nurturing environments, but also have helped members of the migrant community to launch new careers as family day care providers.

offers preschool children important learning experiences, she sees two arguments for continuing to work with home-based caregivers. The current strategy diffuses the child care funds widely through the community, creating 50 part-year jobs rather than the five positions that would be created in a center.

● **The current strategy diffuses the child care funds widely through the community, creating 50 part-year jobs rather than the five positions that would be created in a center.**

Ramirez also wants to ensure that the migrant children's transitions into early childhood programs are smooth and supportive. In family day care, she observes:

> *They eat the same food. They are hearing the same language. The background noises are the same. The smells are the same. It is just a lot like home.*

However, changes in Oregon's administration of child care subsidies have thrown the future of the state's migrant child care program into question. To consolidate the varied new subsidy programs, the state considered transferring the administration of all child care services (including the migrant program) to the welfare department. That would have obliged migrant parents to apply to the welfare office for child care subsidies, although most of them are ineligible for welfare benefits and many fear the agency might share information with the Immigration and Naturalization Service.

Mary Larner

Migrant-worker mothers in rural Oregon appreciate the availability of dependable, safe family day care through Child Care Unlimited.

Instead, responsibility for administering child care went to the Employment Department. That arrangement is less stigmatizing to parents, but it has led to difficulties for the family day care providers who care for subsidized children. The Employment Department requires that any business meet a standard set of contractual requirements before receiving public funds, but these requirements effectively exclude family day care. For example, the business must have a separate telephone line and printed business cards, and it cannot operate in a private home.

Ramirez and her colleagues are now working with the Employment Department to modify those requirements. At the same time, she is translating the contract into Spanish and helping the former migrant providers in her program to understand and meet their tax and record-keeping obligations. Streamlining the child care subsidy system may yield long-term benefits, but in the short term, it has disrupted a local system that was working well.

COMMUNITY IMPROVEMENT COALITION OF MONROE COUNTY

Forsyth, Georgia

The Community Improvement Coalition of Monroe County (CICMC), a grass-roots organization in the rural town of Forsyth, Georgia, enables local family day care providers to participate in the federally funded Child and Adult Care Food Program. The coalition's family day care program is managed single-handedly by Annette Lucear, a concerned citizen who works to improve the living conditions that face low-income residents of Forsyth and the rural areas that surround it. In 1989, CICMC administered a federal grant to pay for repairs to the homes of low-income residents interested in providing home-based child care so they could meet state family day care licensing standards. Now that they are licensed family day care providers, these caregivers are among 22 in Monroe County who benefit from the food program's training and reimbursement for the costs of serving healthy meals to the low-income children in their care.

The Community

Forsyth has been the county seat of rural Monroe County since 1825. Located along Interstate 75 between Atlanta and Macon, this town of 5,300 is a mix of old and new. Although the races coexist fairly peacefully here, a two-culture history still shows in the town's older housing. On one street are rough wood houses with two small rooms each and minimal plumbing, built 50 years ago for domestic laborers; around the corner, large, pillared homes, aging and in need of paint, stand as a reminder of past wealth. Newer structures have sprung up on the edge of town—modest ranch homes on shaded streets, as well as the familiar national chain motels and fast food restaurants lined up near the highway to serve travelers. The county has three public schools, five doctors, 36 restaurants, and 1,100 motel rooms.

Along with a large sewing factory, the restaurants and motels are important employers for the community, although the jobs they offer are low-wage and often lack benefits. Other citizens of rural Monroe County work on dairy farms or for logging companies and sawmills. To find a job that pays well, many residents commute 25 miles to Macon. These various employment options generally involve long hours away from home, and they impose odd schedules on workers. Some parents in town use one of the three child care centers, but the vast majority of Monroe County's children grow up in the care of neighbors or relatives.

Sponsoring Organization

CICMC is a small organization established in 1981 to mobilize low-income residents to improve conditions in their community. It focuses especially on housing in Forsyth. CICMC worked with the town to administer federal funds from the Community Development Block Grant to repair and rehabilitate over 75 homes. The organization first conducted a housing survey to document the deterioration of the town's housing, then selected the homes to be rehabilitated, and monitored the construction. In 1984, CICMC secured a loan guarantee through the federal Department of Housing and Urban Development to build an apartment complex for low-income elderly residents. These accomplishments grew out of the work of a committed 15-member board and one paid staff person—Annette Lucear.

The Family Day Care Effort

Project history. In the late 1980s, CICMC learned about the benefits of organizing local family day care providers into networks and linking them to the U.S. Department of Agriculture's food program. By sponsoring the food program, community organizations can draw

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The coalition's family day care program is managed single-handedly by Annette Lucear, a concerned citizen who works to improve the living conditions that face low-income residents of Forsyth and the rural areas that surround it.

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(One) provider's house is old and poorly constructed, but grant funds have enabled her to improve it—to screen in the entry porch, install a stainless steel counter, create a small modern bathroom, and buy a fire extinguisher for the kitchen.

federal funds into the community, link providers to sources of professional support, and receive a small but stable administrative fee to manage the program. While exploring these possibilities, CICMC came into contact with Save the Children's Atlanta field office, and with that agency's encouragement, CICMC started a food program sponsorship in 1988 by enrolling three homes.

One difficulty in building a sizable food program network in Monroe County was that to participate in the program, family day care homes had to be licensed by state authorities and meet a long list of health and safety criteria. Many of the homes in the areas where the county's low-income children received care could not pass those minimum standards. Working with Save the Children, however, CICMC received a federal grant from the Office of Community Services to rehabilitate 13 substandard homes for low-income individuals who wanted to become licensed family day care providers. This $126,000 grant, matched locally by the value of volunteer labor, facilitated substantial repairs to the homes and enabled 13 more providers to join the CICMC food program. Word-of-mouth promotion led to further growth in the program, to 22 providers in 1992.

Mary Lerner

Federal funding helped a Forsyth, Georgia, provider purchase this fire extinguisher and make her home safe for child care.

The home renovation project. The project to repair the homes of potential family day care providers allowed CICMC to use the food program's supports to improve the care many children in poorer sections of Monroe County received. CICMC established income criteria to define eligibility for the home repairs. Some of the grant recipients had been poor all their lives; others had fallen on hard times more recently.

One grant went to a young married couple who had had an adequate income until the husband became unemployed. Lucear explains, "They just weren't making ends meet. I knew what was going on. I knew that . . . she was buying dried peas and dried beans in the place of meat, so she could give her children some protein." The couple met the income guidelines and received a grant to make repairs, to open a family day care home, and to operate it for at least five years.

Another repaired home belongs to an elderly provider who lives on a social security check, about $20 a week in fees for each of the two little girls she cares for, and government reimbursements for meals she serves the children. This provider's house is old and poorly constructed, but grant funds have enabled her to improve it—to screen in the entry porch, install a stainless steel counter, create a small modern bathroom, and buy a fire extinguisher for the kitchen. The floor still has weak spots, but the health and safety needs of the children have been met.

After the grant program ended, CICMC was unable to help others in difficult circumstances to repair their homes to legitimately take in children for pay. Recent recruits to the food program have of necessity been those whose homes were already in good repair, or who could pay the cost of renovation themselves. The mix of income levels among the providers gives a healthy diversity to the family day care network, but many caregivers who are poor and live in deteriorated housing in town or in the rural areas cannot meet licensing standards and benefit from food program participation.

The Child and Adult Care Food Program. The nutrition program is the centerpiece of CICMC's ongoing work with family day care providers. In the opinion of the authorities responsible for the Child Nutrition Program at the Georgia Department of Education, Lucear makes the program work the way it was intended to. The children and family day care providers reached are primarily low-income or poor, so the modest reimbursements of a few dollars a day per child for breakfast, lunch, and a snack make the difference between a jam sandwich alone and a lunch that includes milk and fresh fruit. Caregivers ask very low fees for child care because they know how low wages are in Monroe County. The state's human resources department pays $35 a week for subsidized child care, but many of the CICMC network providers take only $20 or $25 a week. Even with a full house of six children, a provider can earn no more than $600 each month in fees. The same provider can receive over $300 in reimbursements from the food program for the meals she serves the children.

In addition to overseeing food program claims and reimbursements, Lucear provides nutrition education. In quarterly training sessions for the providers, she scrupulously goes over the information she has received from the state education department. She explains how to fill out food program forms, reviews the types of foods that are not allowed (such as jam-filled breakfast pastries, which are not considered a fruit), and talks about the health rationale behind the program's nutritional guidelines.

During training sessions, Lucear rephrases the state's requirements in terms that make sense to the providers. For instance, the guidelines state that "perishable items must be refrigerated." Lucear tells the providers to "keep foods that will spoil in a cold place." She is convinced that by giving the providers knowledge about nutrition, plus the resources to buy healthy food, the program makes a significant difference in the children's health. Their parents too often lack the money or the time to feed them well. "Usually the mother, if she works at McDonald's, will just bring a burger and fries with her when she comes to pick up her kids, and that's dinner."

Monitoring, the third aspect of the federal food program, keeps Lucear on the road. She visits 22 family day care providers every three months, and reviews at each visit a checklist of safety items based on state licensing standards. These visits give her a chance to explain again and again, one-on-one, the importance of specific health and safety precautions, like holding practice fire drills with the children. One provider explains that the children pretend there is a fire and then crawl out of the house to avoid the smoke. "To them, it's a game."

Lucear describes the rationale behind the regulation: "In a real emergency, they would get on a bed or something if you didn't practice it. They computerize it in their minds, once you practice it."

Lucear gives the same level of attention to how the provider stores, prepares, and serves food to the children. She reaches into refrigerators to feel that the milk is cold, and she checks to see that the children have individual cups so that germs will not spread. Reinforcing such health and safety standards goes a long way to ensuring the health of the children who spend all day in the family day care home.

The providers accept monitoring as part of the program—partly because Lucear presents it matter-of-factly. "You go strictly by the book and by the guidelines and regulations. . . . That's all you've got to go on. And once all those guidelines check out, then you've got no problem." She is determined not to jeopardize the program by violating its rules. Moreover, she treats all her providers with respect, good humor,

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By giving the providers knowledge about nutrition, plus the resources to buy healthy food, the program makes a significant difference in the children's health.

and warmth. They appreciate it. Even in her monitoring role, she says, "I just want to be me. Treat everyone equal like I want to be treated. Everything works out fine that way."

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Only after safety problems have been addressed can Lucear help new family day care providers secure a license and sign them up for the food program.

Project Structure and Funding

CICMC's food program sponsorship is a small operation. The administrative funds provided by the program hardly cover the required start-up assistance, nutrition education, paperwork, and home monitoring. Lucear is the organization's only full-time employee; a part-time staff member works with Save the Children's charitable program. For the food program, CICMC handles $78,000 per year in reimbursements to providers and receives about $16,000 to cover salary, materials, mileage, and telephone bills.

Lucear works long hours for little pay. As she said in a local newspaper interview, "I believe that each of us has a duty to serve our fellow man, woman, and child. We are meant to help one another."

Mary Larner

Annette Lucear's monitoring visits to caregiver homes help keep her in touch with the providers and the children in their care.

Challenges and Next Steps

The greatest tension confronted by CICMC's family day care program comes from its popularity. Annette Lucear feels that 22 providers scattered across a 250-square-mile county and beyond are about all she can handle. "I don't want to get overloaded. If you have so many providers and you don't have the extra staff to make sure it's running right, then something's going to go wrong." Yet word spreads quickly in a rural area. People who already have a license to care for children call to ask about joining the program. They have heard from friends, the county health department, or the county cooperative extension service that Lucear can help them give the children good nutrition. And when they call, she does not turn them away.

In the poor neighborhoods of Forsyth and in the homes built for sharecroppers in Monroe County, this program's expansion is limited by the lack of funding for repairs to bring the homes up to licensing standards. As Lucear puts it, "The first step is to make sure that the home environment is a safe place for the children to be. A little space for them to take naps and play, a home free of hazardous things, and safe for the children." Only after safety problems have been addressed can Lucear help new family day care providers secure a license and sign them up for the food program.

FOUNDATION CENTER FAMILY DAY CARE NETWORKS

Sacramento, California

Family day care homes offering a full-fledged Montessori program are not common, and it is surprising to find them in the homes of former migrant farmworkers in agricultural towns and rural areas in central California. The Foundation Center for Phenomenological Research has set out to "democratize" the Montessori curriculum by using the pioneering Italian educator's philosophy, approach, and materials in centers and family day care homes that serve the children of the working poor and migrant farmworkers in California.

Working under contract to the Child Development Division of the state's education department, the Foundation Center offers attractive, high quality, comprehensive child development programs to families who meet state eligibility criteria. The Center operates programs throughout California, consciously using child care as a vehicle for empowering families and communities. This profile focuses on two family day care networks near Sacramento.

Foundation Center programs, in both centers and family day care homes, provide comprehensive services, varied learning experiences, healthy food, and staff who speak the child's language. The calm and stable environments sometimes contrast starkly with the chaos in migrant children's lives. Program staff come from the communities they serve, and most providers in the family day care networks that serve migrant families are themselves former farmworkers. This approach ensures that children, parents, and caregivers can identify with each other and can work together comfortably.

The program aims to minimize the economic pressures that child care imposes on the provider's family, and strives to make the required training accessible, relevant, and valuable for individuals with little formal education. It pays attention throughout to what Antonia Lopez, a former board member and the Foundation Center's director of education and staff development, calls "cultural closeness" for the providers, families, and children.

The Communities

The Foundation Center child care programs span the state of California, from Los Angeles to the San Joaquin valley to the Oregon border, and one of the three family day care networks operates in central Los Angeles. The two family day care networks visited for this study serve rural communities within an hour or two of Sacramento. Both are active only during the six-month harvest season, when migrant farmworkers come to the area.

One network serves the Sacramento Delta, a patchwork of low-lying, fertile fields separated by canals and levees. Ranches, dotting the flat fields and orchards, typically include a big house, several outbuildings, and one or two smaller homes for the ranch managers. Residents of the delta live isolated from one another; the levees rising on the horizon hide the neighboring ranches, and narrow roads and ferryboat canal crossings slow down travel.

The second migrant family day care network lies to the north, in Placer County, in the foothills of the Sierra Nevada. Here in a more open landscape farmers grow rice and cultivate raspberries. Dairies, turkey ranches, packinghouses, and plant nurseries also employ agricultural workers. The migrant families scatter throughout the county, but most of the Foundation Center family day care providers live in pleasant bungalows at the outskirts of the county's two major towns, Lincoln and Roseville.

All the children cared for in these two networks qualify for migrant child care funding under guidelines established by the California Department of Education. During the six months when the migrants live in the area, the children spend 10–12 hours each day with a child care provider. They usually arrive at 5:00 A.M., and their parents do not pick them up until after 4:00 P.M. Most of the migrant families are Spanish-speaking, but a growing number from Guatemala speak the Indian dialect Nahuatl. One Mexican-born provider

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Program staff come from the communities they serve, and most providers in the family day care networks that serve migrant families are themselves former farmworkers.

cares for three children who speak only Nahuatl; she is learning a few words of their language so she can speak with them and show her respect for their culture.

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The remote rural areas and small towns where the migrants stay and work have few facilities suitable as child care centers. Family day care homes are more appropriate.

Sponsoring Organization

Marilyn Prosser, executive director of the Foundation Center for Phenomenological Research, established the organization in 1974 to help small community organizations strengthen their operations. The Foundation Center's board included a wide range of professionals who volunteered to lend grass-roots groups their expert assistance in budget planning, proposal writing, or other technical issues. In particular, Prosser trained nonprofit community groups to take advantage of administrative principles and practices honed in the competitive world of business. The term "phenomenological" was included in the Foundation Center's full name to indicate the organization's underlying belief in the contribution that each person can make to the community. Prosser explains that the term itself expresses "a posture, . . . [indicating] how we stand in relation to our work, to each other, to ourselves, and to our community —respectfully, with a sense of dignity, and an appreciation of struggle."

Discovery
Child
TEACHING MONTESSORI IN THE HOME
THE CHA BOARD

Mary Lamer

Montessori-based child development materials, often translated into Spanish, form the basis of the Foundation Center's training program.

By the late 1970s, Prosser wanted to test the advice the Foundation Center routinely gave to other groups about managing community-based organizations. In 1980, the organization bid to operate a state-funded child care program that had been closed, and won the contract. Seeking an educational approach that would meet the needs of the children and families and would fit the Center's values, Prosser and Lopez chose the Montessori method. Lopez explains:

> *Montessori is consistent with our views of the nature of the child, the nature of education for life and for peace, and the role of the family in the child's education. It has demonstrated the ability to situate itself within a variety of cultural milieus, to use "local or home languages," and to lend itself to the values of the families served.*

More state contracts followed, and the organization's approaches to administration, training, and quality control in child care programs have been articulated, tested, and refined through replication in two dozen sites.

The Family Day Care Effort

History. The Foundation Center turned to family day care networks during the 1980s to give migrant farmworkers better access to the state's subsidized child care services. The remote rural areas and small towns where the migrants stay and work have few facilities suitable as child care centers. Family day care homes are more appropriate. In the Sacramento Delta and Placer County, Prosser and Lopez canvassed the migrant communities in search of women interested in becoming family day care providers.

Maria Cuevas, a migrant who opened one of the program's first family day care homes, describes it as follows:

> *I worked for 15 years in the tomato fields. In 1981, we were working with the tomato machines in September, and they came to ask us if we wanted to take care of children. At first, we were a little afraid to be taking care of a lot of children that belonged to someone we did not know well, but we took the risk and we accepted.*

Visits followed to the homes of farmworkers who showed an interest. If their homes could meet state regulations, the providers received basic equipment and training, and children were placed in their homes. Since that time, family day care providers have been organized into networks. This makes it easier to link them to the comprehensive services, the Montessori training and resources, and the support and oversight that are key to the Foundation Center's program.

Comprehensive services for children. The Foundation Center's program focuses on the children and families in its centers and family day care homes, and the program's features reflect its goal of providing an orderly, harmonious, stable, and challenging environment to support the children's development. Staff pay meticulous attention to the children's physical setting, the interactions between adults and children, and the children's experiences.

The Montessori approach guides the design of the learning environment. It offers varied opportunities for children of all ages to explore, focus, and concentrate. Each child's language is respected, and the program supports goals that parents hold for their children—particularly the early mastery of social and cultural skills that are highly valued in the Mexican culture. When parents come into the family day care homes at the end of the day, caregivers share news of the children's accomplishments and urge the parents to watch the child working and learning.

The program also gives children and families access to specialized services. Annual fairs bring health care providers to the community to screen children and parents for health problems. These providers explain health care procedures and the nature of any difficulties, make referrals for follow-up care, and offer many basic medications free of charge.

Where possible, the child care centers are sites for the health fairs. In Placer County, however, the health team sets up its eight screening stations in one of the family day care homes. The health education coordinator recalls:

> *The people started and walked around the backyard, where there was registration. Height, weight, and temperature was on the patio. The vision screening was outside. The living room was for the hemoglobin and urine samples; and the kitchen and dining room were for the two doctors [who gave physical examinations].*

At other times of the year, the program organizes social service carnivals that help the families learn about resources and services in the community. The program contracts with a physical therapist to give gymnastic instruction on regular visits to the homes and centers, and a similar contract is being considered for violin instruction.

Offering comprehensive services in family day care homes can be challenging. For instance, the gymnastics instructor must spend a day visiting one family day care network, driving from home to home with her equipment; at a center, the same instructor could reach 50 children at a single stop. Despite logistical challenges, the Foundation Center assures that children will receive the same services regardless of the setting.

Montessori training. The core of the program is a commitment to make Montessori education available to children in low-income and migrant families. The providers join center-based teachers in a long-term, intensive training program that combines courses on Montessori principles

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Staff pay meticulous attention to the children's physical setting, the interactions between adults and children, and the children's experiences.

and practices, basic education, English-language training, and a range of continuing education topics. Staff working with children in migrant communities attend training for nine weeks during the season when their programs are closed, and they can receive unemployment benefits.

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Literacy courses and child care training are combined, and classes rely extensively on drawings and photographs, to allow all providers to participate on an equal footing.

Since the participants come together from distant sites, the training occurs in a vacant migrant camp, where participants can live with their families if they wish. The training course is conducted in Spanish. Literacy courses and child care training are combined, and classes rely extensively on drawings and photographs, to allow all providers to participate on an equal footing. The American Montessori Society has accredited the 5–7-year training sequence, and three providers have received Montessori certification.

Supports for the providers. Foundation Center family day care providers are salaried employees with full benefits. Their pay is comparable to that of teachers who work in centers—from $1,300 to $1,500 monthly in 1992. The Foundation Center also places up to $12,000 in Montessori equipment and child-size furnishings in providers' homes. The Foundation Center's nutritionist plans menus and ingredients for the providers to use in preparing food that is low in fat, sugar, and preservatives. Each program manager shops for the food with the providers in her network, and the center pays for it. The Center then retains reimbursements received from the federal Child and Adult Care Food Program.

Mary Larner

Children in a Placer County family day care home practice the daily skills valued in their culture, such as grinding corn for roosters to eat.

Further assistance for providers comes from the program manager responsible for placing children in the homes, who conducts weekly home visits, supports and monitors the providers, holds meetings and workshops, and maintains contact with the parents and with center administration. If the Foundation Center operates a center-based program nearby, that program's director is the family day care manager.

The family day care network in Placer County is freestanding, managed by a trainer who makes the hourlong drive from Sacramento each day. The trainer spends several hours visiting each provider. Perhaps because of this support, turnover is relatively low among the providers; those who complete the demanding first year with the program tend to continue for at least five or six years.

Community development. The Foundation Center's long-term goal is to achieve community development through development of the children, parents, and staff who participate in the program. The program's commitment to hire and train staff from the local community deepens its impacts. Lopez explains that the benefits of working with local people include "language and cultural compatibility, access to community support, development of local role models, long-term commitment to the children and families, and the opportunity for genuine community development."

Pride is a key concept in this child care program. The goal is to make the parents proud of the child and proud of themselves. One provider explains:

You get satisfaction from seeing the parents with their children, and you see that they are happy that the child is learning. You feel proud that you have been part of that development.

That feeling is matched by the pride the providers take in their own achievements. Mrs. Cuevas, a grandmother from the Sacramento Delta who was born in Mexico, describes what the program's education means to her: "I always wanted to study, but my mother never wanted me to go to school." With no formal schooling, she came to the United States as a farmworker. In 1981, she became one of the Center's family day care providers. She recalls, "Slowly I learned a few words in English, then slowly [the center staff] taught me more, and I practiced a lot. Now I am in a graduate group, and I am learning literature." She received her Montessori certification in 1992.

Program Structure and Funding

By 1992, the Foundation Center had centralized the administrative and training functions of 21 child care centers and three family day care networks throughout California. This minimized costs. Each center has a director, and two of the three family day care networks are linked to nearby centers.

In its central office in Sacramento, the organization has a staff of only seven: Marilyn Prosser; Antonia Lopez; a full-time Montessori trainer; a nutrition director; a director who manages the health fairs (58 were held in 1992 around the state); an accountant; and one person who keeps track of attendance, enrollment, and billing for all children enrolled statewide. The organization relies heavily on short-term contracts to bring in professionals to address specific needs without engaging additional full-time staff.

The program operates on a standard contract for developmental child care services with the California Department of Education. The department reimburses the program at a rate of $19 per day per child. Through economies of scale, administrative streamlining, and selective use of sophisticated technology, the organization manages effectively with little clerical help. The program serves 2,000 children and has a staff of over 270 across the state, but allocates only 11 percent of its budget to administration. Administrative efficiencies and scrupulous attention to maintaining full enrollment enable the program to cover the costs of an extensive staff training program and enriched services for the enrolled children and their families.

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Challenges and Next Steps

In 1991, the Foundation Center took up the challenge of replicating its comprehensive child care program in several low-income New York City neighborhoods. The demonstration effort has been spearheaded by the Enterprise Foundation, a national group that works with community-based organizations to facilitate the development of needed low-income housing. Community Life Centers will be established in renovated buildings operated by organizations with a history of housing development and community work. In its first phase, the Foundation Center will develop new child care centers, subsequently to be transferred to the community-based organizations. A later phase may involve family day care networks.

The Foundation Center has maintained the three California family day care networks it established a decade ago, helping the providers set up Montessori environments in their homes, placing children, engaging the providers in training, and recruiting new caregivers to replace those who move on to other child care roles or different occupations. However, although the number of centers expands almost annually, the number of family day care networks has not grown.

It is more of a challenge for the Foundation Center to deliver comprehensive services in home-based settings than in centers. Family day care homes, small and geographically scattered, have advantages for parents and young children, but they are more difficult for the organization to equip and support. Also, the program places heavy demands on the migrant-community providers, who spend as many as 12 hours a day with children of all ages and still must find time to cook, plan activities, shop, and meet weekly with the Center's program managers and other providers.

Signs of satisfaction and fatigue combine when the providers describe their work. As one caregiver explains, "If you like your job, it doesn't matter how hard it is. It is very beautiful working with children."

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As one caregiver explains, "If you like your job, it doesn't matter how hard it is. It is very beautiful working with children."

Mary Larner

An early childhood specialist visits the home of a Sacramento caregiver to supplement the Foundation Center's training in Montessori-style courses.

LA CASA DE PUERTO RICO HISPANIC FAMILY DAY CARE HOME PROVIDERS PROGRAM

Hartford, Connecticut

The state of Connecticut is full of stark social and economic contrasts. It has the highest per capita income in the United States, and yet three of the nation's poorest cities rest within its borders (Bridgeport; New Haven; and the state capital, Hartford). In Hartford, the poor central city neighborhoods are home to many families from Puerto Rico and other parts of Latin America who have come to capitalize on the opportunities they imagined the U.S. mainland would offer. Many have faced economic hardship, however, because language barriers make monolingual Spanish speakers ineligible for most jobs. Those who succeed in finding work frequently have young children, and they face the challenge of finding child care. Often they arrange child care with relatives and neighbors, who are likely to speak Spanish with the child, share the parent's cultural background, and charge much less than child care centers.

Since 1987, the community organization La Casa de Puerto Rico has operated a training program in Spanish that reaches Latino caregivers. The program urges the informal providers to register with the state, assists them when problems arise, and links them to a provider association. This is the only family day care training program in Connecticut that is conducted in Spanish and that addresses the challenges of providing safe, high quality care in a low-income household.

The Community

Although Hartford is the state capital, most of the downtown area looks like other small, older cities on the East Coast of the United States. The fits and starts of urban renewal projects have left behind an economic patchwork. On one block, renovated brick buildings house chic restaurants and condominiums; on another block, the lots are empty; still another may feature run-down storefronts with crowded apartments above them. Many of the city's Puerto Rican residents, who numbered close to 45,000 in 1990, live in the neighborhoods surrounding Park Street, the lively, noisy commercial heart of the Hartford Latino community. Although the high cost of living forces many Latino families to rent small apartments, a growing number live in modest two- and three-family homes that are good settings in which to open family day care businesses.

Hartford's Latino population grew rapidly during the 1960s and 1970s, when recruiters brought Puerto Rican workers to harvest tobacco on farms around the city. Newcomers include large numbers of single mothers with young children, who seek to escape Puerto Rico's high unemployment rate and hope to provide a brighter future for their children. Now 50 percent of Hartford's schoolchildren are Latino. Discrimination, however, frequently greets Latino job applicants. The city has few English as a Second Language classes; consumer prices are high; and wages for unskilled jobs are low. Although Puerto Ricans can apply for public assistance, they often prefer to work if they can. (Citizens of other countries are not eligible for assistance.) The Latino community includes many poor families who need affordable child care.

Sponsoring Organization

Since its incorporation in 1972, La Casa de Puerto Rico has served Hartford's Latino community as a community action and advocacy organization. The agency grew out of grass-roots organizing in Hartford's Latino neighborhoods during the War on Poverty. Since then, it has become an established service provider and voice for Latino interests in the city. The organization receives funding from the United Way, the federal government, the city, and a range of local corporations and foundations. A staff of 22 address concerns related to civil rights, education, housing, job development, and senior citizen needs.

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This is the only family day care training program in Connecticut that is conducted in Spanish and that addresses the challenges of providing safe, high quality care in a low-income household.

An emphasis on children and families developed in La Casa in 1987, when the organization responded to a United Way request for proposals to address child care needs in Hartford's poor neighborhoods. La Casa's staff proposed to reach caregivers in the Latino community and train them to become registered family day care providers. The training would improve the informal care many Spanish-speaking women were offering, and it would help inform the women about career opportunities in child care. In 1987, the Hispanic Family Day Care Home Providers Program began. The program coordinator, Gladys Rivera, explains that because the program supports the aspirations of La Casa's constituency, "it gives La Casa a good image in the community."

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Once the providers establish their businesses, they turn to La Casa for the federal food program, for home visits and telephone contact with the staff, and for consultations with the nurse on child health issues.

Program Structure and Funding

This program relies on the full-time efforts of Rivera and a resource worker, Paula Santiago, both of whom have backgrounds in education and personal ties to Puerto Rico. A Spanish-speaking nurse who consults with the program eight hours a week has become like a third staff member. When providers have problems that require specific expertise, the resources of the larger organization are available to them. Since its inception, the program has received financial support from the agency's United Way allocation and from foundation grants. In 1992, it began to sponsor the federal Child and Adult Care Food Program, which adds a modest but steady amount of public-sector funding.

Mary Lamar

A nurse who works with La Casa de Puerto Rico visits a family day care provider to review the children's immunization records and offer advice.

The Family Day Care Effort

Training is the centerpiece of La Casa's Hispanic Family Day Care Home Providers Program, and a range of complementary activities surround the training. Rivera and Santiago interview interested individuals before the training starts to help them decide if family day care is feasible for them. After the training course ends, they work closely with graduates to help them meet state requirements for family day care registration. Once the providers establish their businesses, they turn to La Casa for the federal food program, for home visits and telephone contact with the staff, and for consultations with the nurse on child health issues. Many also join the provider association that grew out of La Casa's program as a way to link Spanish-speaking providers to one another and to the wider child care profession.

Training program. Each year, La Casa holds a 38-hour training course to prepare interested Spanish-speaking individuals to become family day care providers. By 1992, some 267 Latino residents had completed the training. Rivera and Santiago promote the training through advertisements in the Spanish-language media, and they review the state's list of newly registered providers and call those with Spanish surnames. Some trainees have never offered child care, but others already care for children informally. Still others have already registered as family day care providers. Enrollment is limited to about 50 participants, which leaves 20–30 people on the waiting list. These individuals have first priority for the next year's training session if they remain interested.

When Santiago interviews an applicant for training, she tries to get a feel for the individual's interest in children, as well as for her living environment. She discourages individuals who appear to be more eager to make money than to serve children and families. Highly motivated applicants who have housing problems are sometimes welcomed into the training. (This can include residents of public housing, who cannot register as providers in Connecticut.) Santiago explains that La Casa's aim is "to give them the opportunity to be in the group and to have the knowledge. They won't be in public housing forever!" The program supports the striving of disadvantaged community residents to "get something more out of life" through a career in child care.

La Casa's training program is ambitious. The course is in Spanish and is free to participants; it meets on eight consecutive Saturdays, and attendance is mandatory. The curriculum begins by addressing family day care as a business. Discussions cover the state's registration requirements, issues of administration and finances, and the steps a provider must take to protect child health and safety. The remainder of the course focuses on children's development, activities, and special topics—such as child abuse and serving children with special needs. Each participant also arranges to observe a center-based program.

The program enlists Spanish-speaking instructors from varying backgrounds to lead the sessions. For instance, a physician born in Colombia who now works with an insurance company led one morning's lively discussion of health and safety pointers. In another session, a bilingual first-grade teacher with a Ph.D. in education brought boxes of materials for the group to work with while learning about art activities for preschool children.

Training helps the participants decide whether they want to become family day care providers, and it prepares those who do enter the field to offer excellent care. Because informal child care is so common in the Latino community, the staff of La Casa stress that family day care is a serious business. The early discussions of regulations, record keeping, and safety highlight the responsibilities a provider must accept when she agrees to care for a child. Later sessions help participants develop the practical skills they will need to work with children and parents. At the outset, some participants worry that they may not be able to meet the demands of the course. However, nearly everyone who enrolls completes the program, and many go on to work in child care.

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Training helps the participants decide whether they want to become family day care providers, and it prepares those who do enter the field to offer excellent care.

Registration assistance. As the training program ends, the graduates who remain interested in family day care face the hurdle of registering with the state. In Connecticut, any person who cares for even one child who is not a relative must be registered. State regulations allow registered providers to care for up to six children full-time and three others before and after school. The provider and other household members must present medical information (a doctor's certification and tuberculosis test results) and must pass a criminal background check, and a state licensing worker must conduct a home inspection.

La Casa staff help providers move through this process by translating and explaining state requirements, which are printed in English only, and assisting the provider to make any necessary changes to her home. A La Casa revolving loan fund offers providers up to $500 at only 1 percent interest to make home repairs or buy child care equipment. However, very few providers have applied for loans. The staff believe that they are afraid to incur debts they may be unable to pay. Most of the participants in the training program see the registration process through. In 1991, 35 of the 44 graduates opened registered homes—a high proportion in a community where informal care is an accepted tradition.

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The program staff and the resources of La Casa are available to help when a provider faces problems in her child care business or her personal life.

Services for providers. La Casa offers an array of services to support the quality of the care offered by Spanish-speaking family day care providers. In January 1992, the Hispanic Family Day Care Home Providers Program became one of only 13 Connecticut sponsors of the Child and Adult Care Food Program. Statewide, the food program reaches about half of the family day care homes with nutrition education and reimbursements for meals served to children, but few Spanish-speaking providers participate. As a result, the administrator responsible for the food program in the state welcomes La Casa's efforts to register and work with Latino providers.

During the first three months of the food program's operation, La Casa enrolled 17 providers. The staff translated all of the program information and forms into Spanish, and they developed menus that meet the program requirements using foods familiar to the Latino community. These efforts make participation in the program easy and attractive to providers.

Many Spanish-speaking providers feel intimidated by their responsibilities concerning child health. The state's system of registration requires providers to maintain immunization records and medical forms in English for each child. Through the mail, providers receive materials about health and safety that they cannot understand.

Mary [illegible]

Spanish-speaking providers gather to plan a meeting of the association they have founded to improve their family day care businesses in Hartford.

To help them with paperwork and assure that their homes are safe, healthy environments for children, La Casa contracts with a nurse on the staff of a local community health center for eight hours a week to visit the providers at home. In each home, the nurse reviews the children's medical records and examines any children who show signs of contagious conditions. With a practiced eye, she helps identify children who may have chronic conditions or developmental delays. The nurse also offers to join the provider to discuss the child's health with the parents and to answer any questions they might have.

Personal support. The program staff and the resources of La Casa are available to help when a provider faces problems in her child care business or her personal life. Santiago explains, "Most providers lack social services, and they need support" with such concerns as personal problems, family troubles, and finances. She continues, "They receive that help from us." As a large, multipurpose agency, La Casa has an accountant who can assist providers with tax problems; a housing expert to help them cope with landlord-tenant disputes; and the nurse, who is on call for medical emergencies.

The staff of the family day care program talk with providers regularly by telephone, in the office, and on home visits. Santiago's visits usually last two hours or more. She attributes her welcome to the fact that, as she says, "I listen to them. I go to their houses as a friend, not an intruder."

The staff establish close relationships with many of the providers, sharing their own experiences and feelings. Rivera explains that she wants the providers to recognize that, while she is a program coordinator in a large agency, "I am a human being and I have problems, too." She continues, "When they see me, I want them to see that everything I accomplish, they can, too." The program reminds providers that life offers opportunities as well as frustrations and problems.

The provider association. A group of Spanish-speaking providers discovered common interests during the La Casa training program, and this experience spurred them to organize the Hispanic Family Day Care Home Providers Association. In 1992, its fourth year, the association had 76 members and six elected officers. The members gather for monthly evening meetings that review association business, bring news from Rivera, feature a special presentation or discussion, and end with a social hour. Most members attend the meetings and participate actively. Rivera explains that the Latino providers "want to belong to something, be part of a group. They want to be received positively." The association gives them an opportunity to belong, to organize, and to act to advance their common concerns.

La Casa staff work closely with the association's board members to plan meeting agendas, suggest speakers, and mail out letters to the membership. The relationship is a positive one; in Rivera's words, "They feel we support them, respect them, and are working for the association, too." She senses the group's reliance on the knowledge and guidance that she and Santiago offer, but she expects the association to become increasingly independent. "What we're doing now, they can learn to do themselves," she says.

The two staff members link the Hispanic provider association with the 37 other provider associations that make up the Connecticut Family Day Care Association Network. Rivera and Santiago have cultivated relations with other professional groups, and they are invited to meetings on child care policy and professional development. They give the Latino providers a voice in these meetings and bring back news and ideas. They also find it frustrating, however. Santiago comments, "I see so many things for the English-speaking people that I don't see being available to these Hispanic ladies. They should have the same opportunities."

Despite the good intentions of the state's family day care leaders, most conference schedules offer few workshops in Spanish. Recently, the Spanish-speaking providers' hunger for ideas and professional discussion led 18 of them to take a rented van to Cambridge, Massachusetts, where they attended a conference of Hispanic family day care providers held in Spanish. Rivera sees better partnerships ahead between the Spanish- and English-speaking family day care groups. "I think we can work together," she remarks. "Everyone has the same concern for children. Children are children, here or in Asia. They have the same needs. We just work to meet those needs."

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The increasing strength of the Hispanic Family Day Care Home Providers Association may be the program's most lasting contribution to the vitality of family day care in Hartford's Latino community.

Challenges and Next Steps

In recent years, the emphasis in the Hispanic Family Day Care Home Providers Program has shifted from initial training and start-up assistance to ongoing supports for providers operating family day care businesses. Building on the 38-hour training program, the staff have added a resource worker's home visits, the food program sponsorship, and access to the visiting nurse. Periodic workshops offer more training to experienced providers, and linkages with professional associations and conferences also contribute to their growing professionalism. The increasing strength of the Hispanic Family Day Care Home Providers Association may be the program's most lasting contribution to the vitality of family day care in Hartford's Latino community.

The major challenge facing the program concerns stable funding. Grants by private foundations have provided the support that has brought the program to this point, but they can be unreliable. Public funds are hard to come by. In 1992, La Casa competed for a state grant to train family day care providers, and that avenue may hold promise for future support, especially if state funds target Connecticut's low-income or Latino communities where the program has demonstrated success.

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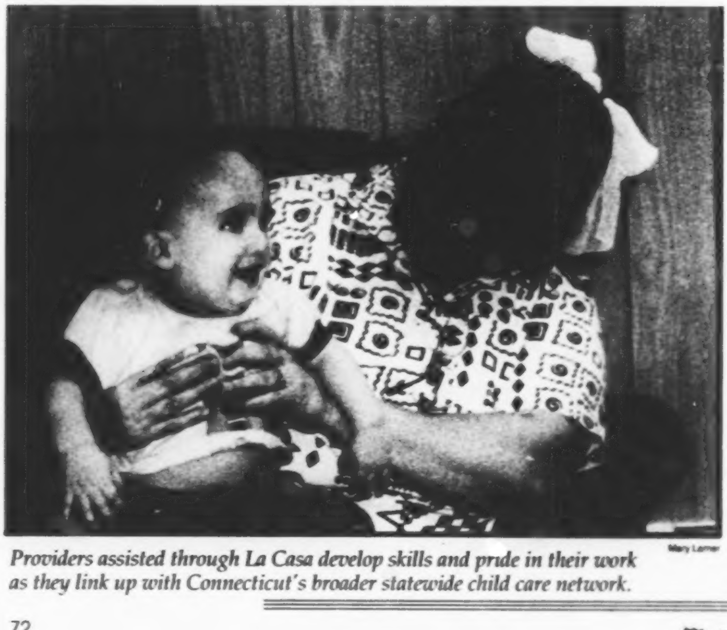
The steady development of La Casa's family day care program rests on the proud and pragmatic understanding that Rivera and Santiago have of the strengths and problems of Spanish-speaking providers in Hartford.

The steady development of La Casa's family day care program rests on the proud and pragmatic understanding that Rivera and Santiago have of the strengths and problems of Spanish-speaking providers in Hartford. Rivera observes, "When you're trying to reach and serve people, especially if they are minorities and people who have to deal with racism and disadvantages and problems, you have to be ready to adapt your program."

La Casa's family day care program has adapted by investing in one-on-one assistance for the providers with personal as well as child care problems. It capitalizes on the pride and ambition of the urban Latino people. It also harnesses what Rivera calls their "sentimentality." She explains, "If you demonstrate that you care about them as people, and you care about their families, you can win their trust and commitment."

Putting those ingredients together, La Casa helps launch low-income, Spanish-speaking women as child care entrepreneurs. One participant in the 1992 training program states proudly, "I've come this far, I know I'm going to finish. I know there are people out there who need me."



Mary Lerner

Providers assisted through La Casa develop skills and pride in their work as they link up with Connecticut's broader statewide child care network.

LOUISVILLE FAMILY DAY CARE PROJECT

Louisville, Kentucky

In Louisville, as in many of the nation's cities, awareness about parents' increasing needs for child care burst on the public consciousness in the late 1980s. Studies conducted by the local United Way and the University of Kentucky revealed that growing demand for child care faced a limited supply of licensed providers. In Louisville, the heads of the two local governing bodies, Mayor Jerry Abramson and Jefferson County Judge David Armstrong, campaigned on issues including child care, strengthening families, and building communities. Local voluntary organizations focused their energies on similar issues. Responding to research and public pressure, the state of Kentucky established a certification program for small family day care homes to expand the supply of child care.

Conditions were ripe for the Louisville Community Coordinated Child Care (4C) to propose an initiative to develop more family day care in the city and in the county around it. In 1990, 4C established the Louisville Family Day Care Project with funds from and volunteer efforts by the National Council of Jewish Women, the Junior League, the Fund for Women, and the governments of Louisville and Jefferson County. The project sought to overcome policy barriers, offered information to would-be providers, awarded small grants to low-income individuals to contribute to the costs of home repairs and child care equipment, and helped providers offer high quality care to the community's children.

The Community

As a city of 286,000 surrounded by farmland, Louisville has been called a "big small town." One local leader explains that it is "big enough to have the blessings of an urban area, yet small enough to retain a sense of belonging and involvement." Like many working-class cities across the United States, Louisville has close-knit neighborhoods that are a source of community strength, but that also divide residents by income and race. A strong manufacturing sector formerly sustained the city, and factories and smokestacks alternate with residential neighborhoods and commercial streets on the poor west side of town. Manufacturing dwindled during the 1980s, however, leaving behind service jobs that do not pay as well as factory work. This forces both parents in many families to find work, and it increases the demand for child care. A 1986 study by the Metro United Way identified child care as one of the area's most pressing unmet needs.

Louisville has numerous day care centers, but almost no regulated family day care existed until recently. Kentucky's child care licensing laws disregarded homes serving fewer than four children unrelated to the provider, and they treated programs for 4–12 children as minicenters—which must pass expensive fire and engineering inspections and obtain conditional use permits from local zoning authorities.

In 1989, the state established an innovative certification process that, while voluntary, gave legitimacy and oversight to small family day care homes. The certification program enabled caregivers who had been operating informally to show compliance with state regulations and to participate in programs like the federal Child and Adult Care Food Program. In response, 4C proposed a local initiative to bring the community's many informal caregivers into the recognized child care system.

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In 1989, the state established an innovative certification process that, while voluntary, gave legitimacy and oversight to small family day care homes.

Sponsoring Organization

For 22 years, the Louisville 4C has worked to support and to develop child care services throughout the community. With United Way funding as its base, the organization focuses on employer-supported child care, referral services, training for workers in child care (including a contract

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The project is a public-private partnership of local government, voluntary organizations, and foundations, with partners supporting 4C goals with funds, volunteer efforts, and public credibility.

to prepare JOBS participants for work in child care), work with family day care providers, and the management of the Child and Adult Care Food Program for centers and homes in a 17-county area. As a strong and established voice for child care in the city and state, 4C has a history of advocacy and policy efforts, as well as a reputation for networking and coalition building around child care issues.

The Family Day Care Effort

The family day care work at 4C reflects the agency's orientation by involving many organizations and touching on varied issues. The project is a public-private partnership of local government, voluntary organizations, and foundations, with partners supporting 4C goals with funds, volunteer efforts, and public credibility.

The project, most active from 1990 to 1993, aims to develop regulated family day care in Louisville and Jefferson County by removing policy barriers and providing the supports to launch new small businesses and ensure that they offer appropriate care to children. Specific activities include publicity about the certification program; How to Start workshops and assistance for new providers; grants to help low-income individuals prepare their homes for child care; and training courses for providers from all backgrounds.

Mary Larner

Public and private leaders have worked steadily to develop and sustain support in Louisville for family day care expansion and quality assurance.

Policy work. The leaders of 4C have influenced child care policies at the state and the local levels. Linda Locke, the agency's expert in public policy, lobbied the state legislature for the policy changes that led to voluntary certification for small family day care homes. Since 1990, 4C policy efforts have focused on local issues. Locke and the organization's executive director, Libby Grever, worked with local political leaders to moderate Louisville's zoning requirements that made it prohibitively expensive to open a child care home.

They also interceded with the city housing authority on behalf of a housing project resident who sought to open a licensed family day care home in her town house apartment. The housing authority's concerns ranged from liability for mishaps that might occur in the home to the difficulty of setting a proper rent payment for the provider whose income fluctuated from month to month. Locke and Grever helped the provider negotiate solutions to both problems. Accidents were covered by the provider's family day care liability policy, and the authorities agreed to base rent payments on the provider's estimated monthly income. The resolution of these problems has set a precedent that may make it easier for others to offer child care in housing project apartments.

Recruitment and orientation. After the state certification program began, 4C's staff launched a public relations campaign using newspaper articles, television spots, posters, and presentations to ensure that caregivers throughout the area were aware of the new regulatory category. Monthly How to Start workshops built on that interest and explained the differences between certification and licensing.

Certification as instituted in 1989 was voluntary for any provider caring for fewer than four children not related to her, but a license was required for anyone caring for 4–12 children. Both certification and licensing required criminal background checks and a tuberculosis test. Certification also called for a home visit by a state worker and six hours of training. For a provider to be licensed, her home had to pass a fire inspection, be approved by zoning authorities, and be covered by liability insurance. Both forms of regulation qualified providers to participate in training, the food program, and 4C's referral service. Staff members estimated that over half the individuals who attended How to Start workshops were caring for children already, and that the children benefited from what the provider learned at the workshop.

Start-up assistance. After the workshop, 4C's staff made themselves available by telephone and in person to assist providers in the certification or licensing process. To help those with limited family incomes cover the costs of home repairs and basic child care equipment needed to meet state standards, 4C set up a small grants program. By the end of 1992, it had made over 65 incentive grants, averaging $500 each. Providers who became licensed could receive $750. Some used the money to pay for home repairs like painting, fencing in a yard, or carpeting a basement room. Others used it to pay for toys, insurance, or fees to attend training sessions.

Once their homes were open for child care, providers could benefit from the federal food program, parent referrals, and more intensive training. The 4C staff continued to respond to requests and questions. One provider, whose certified family day care home, Teddy Bear Day Care, had been open for about six months, praised the help she received from 4C's staff:

> *If you run into any kind of problem and you don't think you can deal with it yourself, you just call them up and somebody there can tell you something about what you want to know. I have called them a thousand times. I hate to keep bothering them, but if I run into some kind of trouble, I do.*

Training. Certified and licensed providers were eligible to attend an 18-hour family day care training course, offered as part of the Family-to-Family project, funded by Target Stores and the Dayton Hudson Foundation. Evening and weekend classes, totaling 15 of the course hours, covered topics from children's activities and development to business practices and professionalism. The other three hours involved peer support: the providers attended association meetings or visited other family day care homes.

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Staff members estimated that over half the individuals who attended How to Start workshops were caring for children already, and that the children benefited from what the provider learned at the workshop.

The provider who opened a licensed family day care home in her housing project apartment was in the first group to complete the Family-to-Family training. Although a child care center operates just down the street from her home, she has a waiting list of 57 children. Having a license to do child care fulfills a dream for her: "I've been wanting to do this for 20 years," she says. She is proud of the quality of the care she can offer to the families who live near her in the housing project.

Project Structure and Funding

Four staff people conducted most of the family day care work at 4C's office. Locke directed program and policy activities, and two staff members, calling themselves "the foot soldiers," managed recruitment, organized How to Start workshops, administered grants, and responded to provider requests for assistance. An early childhood education specialist conducted the family day care training sessions.

Family day care activities were funded through a cycle of challenge grants and matching grants. The city offered 4C a $50,000 grant if matching funds could be found. In short order, pledges came from the National Council of Jewish Women, the Junior League, and the Fund for Women.

The county committed funds to ensure that assistance was available to county residents living outside the city limits.

This type of broad collaboration helped position the Louisville 4C to win a Family-to-Family grant of $230,000 to support training and professional development activities for providers. The obligation to find a local match for that grant elicited a second year of funding from the local partners. Mayor Abramson was not surprised to see that the city's initial grant produced such a positive response. He explained his thinking as follows:

> *I said, "Okay, we will put $50,000 in and see if we can generate a match and be the catalyst to bring some folks together." And as soon as we did that, the others stepped up.*

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The family day care project proved satisfying to all of the collaborators. They saw their modest investments pooled and magnified to produce a sizable effect on the local supply of home-based child care.

Challenges and Next Steps

The family day care project proved satisfying to all of the collaborators. They saw their modest investments pooled and magnified to produce a sizable effect on the local supply of home-based child care. In 1989, two licensed homes were operating in the county; and by the end of 1991, 134 homes were licensed or certified. The project relied on the partners' financial contributions—but it depended equally on the intellectual leadership of 4C. A county government spokesperson comments that 4C is "a driving force for child care" in the area; its staff, this person observes, educate local leaders and community members about child care needs and then "pull the players together around the table" to find solutions. Locke explains that the collaboration demanded that 4C "involve all the players in a meaningful way, to assure that everyone is truly part of the project and has a sense of ownership."

Mary Lerner

The caring attention of this Louisville family day care provider, left, has enabled a parent living nearby to attend a job training course.

Despite the success of the partnership project, the long-term prospects for family day care in Kentucky dimmed significantly in 1993. Advocates worked closely with the state legislature in 1992 to pass a law making the certification guidelines apply to small homes with 4–6 children, who formerly had to be licensed. Many providers applied for the first time to become regulated. However, in 1993, a tragic incident in a certified home made state officials anxious that child care in small homes might be unsafe, and the state department of social services revised the requirements for certification—making them nearly as stringent as the licensing standards they had replaced. The cost and intrusiveness of these requirements are likely to stop many providers from entering the regulated system.

As of early 1994, the Louisville Family Day Care Project has been scaled back. The grant support for provider training has been significantly reduced, and the changes in the certification system have limited the number of new providers. The challenge of finding an effective and politically acceptable means of building an adequate supply of regulated family day care in Kentucky now confronts the 4C advocates again.

NEIGHBORHOOD CHILD CARE RESOURCE PROGRAM

Philadelphia, Pennsylvania

A Presbyterian church annex on a residential street in northwest Philadelphia houses the Neighborhood Child Care Resource Program's office and its resource room for family day care providers and center teachers. Much of the program's work takes place elsewhere, however, in family day care homes and during provider support group meetings held in church social halls. The Neighborhood Child Care Resource Program offers general supports to family day care providers to encourage them to feel they belong to the professional child care community. The program, which began with monthly support group meetings, has expanded to include a telephone "warm line," the resource room, and visits to providers' homes by a child care specialist.

The Community

The Neighborhood Child Care Resource Program serves the Germantown area of northwest Philadelphia, a crowded, diverse neighborhood where middle-class and working-class families mingle. Dense blocks of row houses give way to both gracious old mansions and abandoned or burned-out buildings. This is a community where racial integration provoked intense battles during the 1960s, but ultimately took hold.

In a city of homogeneous ethnic strongholds, the Germantown community remains integrated and sensitive to issues of race and culture. As in many other working-class communities with sizable numbers of single-parent families, child care needs are great in Germantown. Because publicly subsidized child care spaces are in short supply, most families arrange their own care. Many choose family day care because center-based care is costly—about $125 per week per child. Home-based providers ask for about $60–$70 per child or less.

Sponsoring Organization

The sponsor of the Neighborhood Child Care Resource Program is the Northwest Interfaith Movement, a nonsectarian alliance begun in 1969 to serve the community as a catalyst and facilitator for social services and social justice programs. As of 1993, 32 Catholic, Protestant, and Jewish congregations made up the alliance. The organization employs about 20 staff members and sponsors several community services—including a boarding home and nursing home, ombudsman services, and outreach activities, such as community events on Martin Luther King Day.

A focus on child care grew out of an assessment of community needs that identified child care as a priority. In 1989, the organization hired Amy Gendall to develop a child care project. With a social work and advocacy background, Gendall first worked with a group of area child care directors, who urged her to find ways to reach and support the community's family day care providers.

The Family Day Care Effort

Program background and goals. The early development of the Neighborhood Child Care Resource Program's work with family day care providers relied on lessons gleaned from a major mid-1980s foundation demonstration project in Philadelphia that recruited low-income women to become family day care providers. The greatest problem the project encountered was how to make new family day care businesses financially viable. Better-off families would not enter low-income neighborhoods to find child care, and residents of low-income neighborhoods could afford only minimal child care payments.

Gendall concluded that she would not encourage low-income women to enter

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A focus on child care grew out of an assessment of community needs that identified child care as a priority.

such a poorly paid occupation. Rather, she explains, "I work with existing providers and try to get unregistered providers into the system. But unless someone convinces me otherwise, I don't see [family day care] as wonderful economic development for poor women."

● **The goals of the Neighborhood Child Care Program revolve around support, quality enhancement, empowerment, and professionalism.**

The goals of the Neighborhood Child Care Program revolve around support, quality enhancement, empowerment, and professionalism. As Gendall puts it:

> *Our goal is to improve the quality of care for children in northwest Philadelphia. I think the way you improve the quality of care is to have stable providers. And you're going to have stable providers when they get some of their needs met for support and information.*

In 1990, the monthly group meetings began, and in 1991, the program added the resource room and telephone "warm line" for assistance and support. The following year, a child care specialist joined the staff to visit providers in their homes. The program sends mailings to about 200 registered providers in five northwest Philadelphia zip code areas, and calls come in from all over the city. "We're the main group working with independent providers in Philadelphia, so the word gets around and they call us," explains Gendall. Program staff work regularly with 70–80 providers. They see their role as a gateway and a broker—linking providers to one another, giving them access to resources offered by the broader child care community, and encouraging them to identify directions in which they want to grow individually and as a group.

Mary Larner

This family day care home is typical of the working-class sections of Germantown in northwest Philadelphia.

Support groups. Lynnette DeShields, the program's child care specialist, organizes the monthly support group meetings for providers, and a consultant, Norma Latham, facilitates them. Latham is an experienced trainer and social worker, and a former family day care provider. Meeting notices appear in mailings and advertisements in the local newspaper, and 15–20 providers typically attend. After the providers share their personal news, they turn to DeShields for updates on resources and policy developments, and listen to guest experts talk about zoning, tax preparation, child care subsidies, and learning activities for children.

The presentations serve as training and fill a void for these independent providers. Previously, training and support reached only those providers who were affiliated with one of the three large agencies that serve state-subsidized children. In contrast, the Neighborhood Child Care Resource Program's meetings are open to anyone interested in attending. In 1992, the state began requiring that providers complete six hours of training each year. Each support group meeting yields two hours of training credit for the providers who attend.

Opportunities to meet and talk with peers are as valuable to the providers as the presentations. Latham suggests one reason why: "When you're in a house all day with six children under five, you don't know too many grown-ups." Rosters including telephone numbers enable the group members to contact each other to chat or arrange joint outings. One caregiver refers to the support program as a "provider idea group." To her, the value of the group is that it enables providers to get to know each other and to communicate with others who understand their problems—unlike husbands and neighbors, who may suggest that a frustrated provider "drop" a difficult family or leave the business altogether. A constant refrain voiced in the meetings confirms that the providers are professionals: "You are a family day care provider, not a baby-sitter."

Resource room and child care specialist. In its resource room, the program operates a modest toy, book, and equipment lending library, which is open to centers and state-registered providers who pay a $10 annual fee. Although the providers appreciate this access to play and learning materials, Gendall believes that the resource room's potential is best realized through the work of DeShields, who takes the materials to provider homes and explores ways to use them. "Otherwise," she says, "it's just stuff."

Having a child care specialist on staff adds immediacy and intimacy to the support, mentoring, and assistance a program can offer to providers. As Latham puts it, "Lynnette makes this project real. She brings it to life. . . . It is a personal relationship" between the providers and the program.

Providers who are just getting started receive priority for home visits. New caregivers receive start-up information packets and assistance in organizing the home for child care, designing parent contracts, and developing an approach to advertising. DeShields also visits established providers, since experience shows that even veteran providers can become overwhelmed or burned out. On these visits, DeShields may help a provider assess a child who seems to be having problems, or may help plan a way to discuss a disagreement on policies with a parent. The aim is to respond to providers' interests and needs, and to serve as a resource for them.

Linkages with other child care professionals. The program helps link its providers to the broader child care community. The support group meetings bring developments in the field of child care to the providers' attention, informing them about resources, explaining proposed policies, and involving them in letter-writing campaigns. In 1991, five providers from the support program made a five-hour bus ride from Philadelphia to Scranton to attend the first statewide family day care conference. They were the only providers attending from Philadelphia, and virtually the only African Americans. Gendall urges providers to assume leadership roles in meetings and on conference and advocacy planning committees. She also looks for ways to bring family day care providers and center-based caregivers together.

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A constant refrain voiced in the meetings confirms that the providers are professionals: "You are a family day care provider, not a baby-sitter."

Low-income focus. The Neighborhood Child Care Resource Program was not designed specifically to address the concerns of low-income providers, but it offers assistance in a way that is well received in the working-class neighborhood where it operates. Many of the providers serve families who are eligible for public child care subsidy programs—whether or not they receive them. (Waiting lists are long.) Gendall points out that some providers set fees as low as $30 per week because they want to offer a community service that will help low-income families. The program is not involved directly in parent referrals or rate setting, although staff encourage providers to recognize the value of the services they offer, regardless of how much they decide to charge.

The program targets providers on the basis of geography, not income. However, 55 percent of the children in Germantown public schools are from low-income families. The providers themselves are a diverse group. Most are African Americans; some have college degrees; some are homeowners. The staff and the speakers at the support group meetings are as diverse in ethnicity as the members. They treat the providers with respect, and encourage independent problem solving.

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Short-term foundation funding, however welcome, cannot provide a secure future. Grants to demonstrate new approaches do not support stable, professional services.

Program Structure and Funding

The program's staff members have multidisciplinary backgrounds in social work, child care, training, and advocacy. This contributes to the program's emphasis on support, training, and self-determination. Gendall is a social worker, and DeShields has training in early childhood and social work, which strengthens her ability to work with adults, handle interpersonal issues, and identify community resources. In 1993, they were joined by a half-time training coordinator experienced in center and family day care.

This program is not elaborate in staffing or funding. Support groups were developed for less than $30,000 a year from the Northwest Interfaith Movement's core funds. The budget grew to $100,000 a year in 1992–1993 with foundation grants. The program receives minimal public funds and has not sought to administer the Child and Adult Care Food Program. The staff do not want to compete with other local child care organizations.

Mary Lamer

This Philadelphia family day care provider has welcomed help from the Neighborhood Child Care Resource Program to market her services in the low-income neighborhood where she lives.

Challenges and Next Steps

The growth of the Neighborhood Child Care Resource Program testifies to the success with which it has targeted the unmet needs of child care providers in the diverse community of Germantown. Gendall argues that the program's strength is its local focus. "I think we've been successful because we're neighborhood-based and we know our constituency," she says. Starting out with a limited budget and then seeking out community resources, she reflects, "was a good way to get our feet wet and learn about family day care in the community" before launching a full-blown program. When foundation funding later became available, the program's staff had a solid base of knowledge and relationships to build on.

Short-term foundation funding, however welcome, cannot provide a secure future. Grants to demonstrate new approaches do not support stable, professional services. As Gendall says:

> *Ultimately, I would wish that somewhere in the mix of new [public] money coming to the child care field, . . . there could be some small percentage devoted to the kind of training, support, [and] advocacy work being done by neighborhood programs like ours.*

In 1993, the program began to receive state funds to provide child care training. However, new demands for advocacy arose at the same time. The state's new regulations for family day care providers require providers to comply with local ordinances and zoning restrictions. In Philadelphia, providers now face fees amounting to more than $400 just to operate legally. The Neighborhood Child Care Resource Program has helped organize providers to examine and protest unreasonable requirements, hoping that changes will stop providers from simply "going underground." As Gendall puts it, "We've got our work cut out for us."

STEUBEN CHILD CARE PROJECT

Bath, New York

Until the mid-1980s, child care in Steuben County in rural southwestern New York was most often an informal arrangement that parents made with relatives or acquaintances who "took in" children. Before 1985, the county department of social services offered no assistance to help low-income parents pay for child care. That year, the state required that counties provide child care for families involved with Child Protective Services. Later, the mandates included low-income parents who were working or attending school. To meet these state requirements, Steuben County's social services commissioner reached out to the local Head Start grantee, Steuben County Economic Opportunity Program (SCEOP). David Hunt, the Head Start director, made a short-term arrangement to place the 12 eligible children in Head Start programs, and he then worked with county officials to develop a long-term solution to the county's child care needs. The demand to support child care centers in the small outlying communities was small, and Hunt argued that the county should work with the family day care providers already caring for children informally.

The Community

Steuben County, in the Finger Lakes region of upstate New York, is the size of Rhode Island and has a population of only 100,000. The county is on the northern fringe of Appalachia and is 99 percent Caucasian, according to the 1980 census. Local roots are deep, and people cherish their independence. Residents live off the land as long as possible before turning to public assistance. With only three manufacturing firms in the county, many families survive by combining several jobs or traveling from one end of the county to the other to find work. The geography makes family day care almost the only viable form of child care in most of the region. With the harsh winters, parents with long commutes need child care close to their home or workplace. In stable communities like these, families usually know their neighbors or their neighbors' kin, and they are more willing to trust local caregivers than families in large cities often are.

Sponsoring Organization

SCEOP is a community action agency that has operated a Head Start program since 1966, plus 60 other programs, including energy and housing assistance, nutrition programs for seniors, and employment services. The Child Care Project, managed by Evelyn Efinger, operates within the agency's Child and Family Development Program, which also includes Head Start and a case management program serving teenage parents.

In collaboration with the local social services department, the Steuben Child Care Project designed the child care subsidy program for the county in 1986. The program served over 500 children in 1992. Agency staff handle parent intake and eligibility determination, maintain a supply of family day care homes certified to receive public funds, and process the payments to providers. The program also offers child care resource and referral services, provider support, and provider training. SCEOP's mission is to give residents access to services that improve the quality of life in the county. While many of SCEOP's programs target low-income individuals and families, the Child Care Project serves the entire community through its development of child care resources and its referral service.

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Agency staff handle parent intake and eligibility determination, maintain a supply of family day care homes certified to receive public funds, and process the payments to providers.

The Family Day Care Effort

SCEOP's Child Care Project works with parents, providers, and county officials to ensure that families have access to safe, organized child care. The project assists family day care providers through provider recruitment and certification, access to the federal Child and Adult Care Food Program, parent referrals, and a mobile resource library called Crayons to Cribs.

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The Child Care Project helps those who are already caring for children to, in Efinger's words, "grow into the profession" by accepting support, undergoing training, and eventually joining the regulated system.

Helping providers become regulated. Until 1991, New York State delegated to counties the authority to establish local criteria for certifying family day care homes as eligible to receive public funds. The Child Care Project designed the certification system for Steuben County. The process included an orientation, a home visit, and six hours of training annually, with recertification after the first six months and every year thereafter. State-funded start-up grants to family day care providers enabled the Child Care Project staff to spend up to $400 on needed equipment to help the new providers become certified. Working under a county contract, SCEOP recruited and oriented new providers, assessed their homes, and helped them meet the guidelines. A county official made a final inspection of the home.

Because New York State was considering changing from a licensing system for family day care to one of registration, SCEOP received state grants in 1988 and 1989 to explore different regulation models. The staff compared the county's detailed process for certifying homes to a pure registration model in which, as Hunt describes it, "you come in the morning and you sign up, you fill in the papers correctly, and you're in business before you leave."

This upstate New York caregiver handles a child's minor injury the same way any parent would—with tender care and a Band-Aid.

The Child Care Project staff began the experiment convinced that the home study was important for assuring quality child care. However, their experience persuaded them that quality can also be improved in a more open registration system that bypasses the home study but builds in supports for the providers. The Child Care Project helps those who are already caring for children to, in Efinger's words, "grow into the profession" by accepting support, undergoing training, and eventually joining the regulated system.

This same logic led the agency to create a process for approving homes that are legally exempt from regulation because the providers care for only one or two children—so that county child care subsidies could flow to those homes. By 1991, the program had approved 70 exempt caregivers in the county, in addition to the 130 certified family day care homes. The entire system changed that year, however, because the state adopted a registration system in which applications are processed by state officials. The role for local agencies, like SCEOP, is now much smaller.

The child care subsidy system. SCEOP also developed the process by which the county department of social services administers child care subsidies. One official explains, "Day care is such a bulky program" that the social services department lacked the staff to manage it effectively. The subsidy program began in 1986 with a pool of $49,000 in state child care funds only for children identified as being at risk of abuse or neglect. As eligibility expanded to include families who needed child care to work or attend school, the program budget grew to $1.2 million in

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1991. As designed by SCEOP, the subsidy system is uncomplicated for parents, since the Child Care Project referral counselors can determine the family's eligibility in one interview. They then deliver completed application forms to the social services department, which reviews the forms and authorizes subsidies within a week or two.

SCEOP has also computerized the subsidy payment system. Recognizing the importance of timely payments to providers, who often face cash flow problems, SCEOP processes the reimbursement checks every two weeks. By comparison, 4–6-week delays are common in most subsidy systems. Through these activities, the agency has become an intermediary for most interactions among low-income parents, the Steuben County Department of Social Services, and child care providers.

Supporting providers' businesses. The Steuben Child Care Project also works to maintain a countywide supply of care. It supports providers with a referral service, with the federal Child and Adult Care Food Program, and with training and access to loaned equipment and low-cost materials through scheduled visits by the Crayons to Cribs van. To encourage providers to participate in the food program, the staff have prepared a numbered list of balanced menus using approved foods. Providers using suggested menus can simply write the number of the meal they served on reporting forms, noting substitutions. SCEOP handles the federal child care food program payments to providers the same way it handles subsidy payments. Twice a month, it advances the full amount claimed from the agency's cash reserves.

Child Care Project staff have been creative in finding ways to improve the quality of care offered in this sparsely populated county. They usually hold training sessions twice a month in different parts of the county, but the Crayons to Cribs van is the centerpiece of the agency's ongoing support. The Head Start program used the van until it became unreliable for transporting the children, and then SCEOP replaced its seats with shelves and filled it with toys, supplies, and child care equipment. The Child Care Project's trainers drive the van on a regular route that reaches each provider's home every month. For the majority of providers who participate in the food program, the first portion of the visit concerns meal service monitoring. Once that task is complete, the trainer takes care of the children while the provider goes to the resource van to select free materials or borrow toys or equipment—which she can return when the van comes by the next month.

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The trainer takes care of the children while the provider goes to the resource van to select free materials or borrow toys or equipment.

The mobile library draws on a $50,000 inventory of cribs, fire extinguishers, cots, climbing equipment, tricycles, easels, paint, and toys of every description, assembled through donations and grants. Also, program staff explain to new providers that the state offers them $400 worth of start-up equipment that is "for you to use for the duration of your business. If you close your business, the equipment will revert to our lending library for others to use as they get started."

Low-income focus. The SCEOP Child Care Project merges a strong institutional focus on the low-income segment of the county's population with a growing emphasis on communitywide services that support the child care delivery system for all families. The Child Care Project grew out of the agency's experience as a Head Start grantee, and staff explain that they approach child care "with our Head Start heads." Head Start's philosophy of working respectfully with families guides project work with family day care providers. Staff offer support to providers, but treat them as independent professionals who choose whether and how to take advantage of the project's services.

Project Structure and Funding

As in most community-based programs, the staff of the Child Care Project fluctuates in size, depending on funding. In 1992, the staff included Hunt, Efinger, a resource developer, two trainers, and two full-time and one part-time referral counselors. Several staff members have Head Start backgrounds, and the resource developer was a family day care provider for years. Other staff have worked in education, human services, and customer services. Hunt once worked in another New York county's social service department, where he became familiar with the priorities, procedures, and language of the state's social service bureaucracy.

Fund-raising is a key administrative challenge in a program like this. The budget available for staff salaries and expenses in 1992 was about $180,000, although the organization handled much more than this amount in subsidy payments, start-up funds, and food program reimbursements. Most of the budget comes from public sources, including county funds for the subsidy program administration and resource development, federal funds for sponsoring the food program, one state grant for child care resource and referral services, and another to administer provider start-up stipends.

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Because the agency had the mandate to establish a new county child care system in the 1980s, the staff had some control over the form the system took, and they ensured "user friendliness" for providers and parents.

Mary Larner

This safe climbing equipment is on loan to a family day care provider from the Steuben Child Care Project's traveling van.

Challenges and Next Steps

Rapid changes in the child care environment have brought both growth and uncertainty to this project. Because the agency had the mandate to establish a new county child care system in the 1980s, the staff had some control over the form the system took, and they ensured "user friendliness" for providers and parents. In recent years, however, decision-making about the local child care system has become more dispersed. For instance, the growth of child care funds linked to welfare has made county social services officials pay more attention to the child care subsidy program. They now engage Child Care Project staff in friendly debates about policies and procedures.

New York State authorities have replaced the county-controlled system for certifying family day care providers with a uniform statewide registration system. Many providers are unhappy about the change because it replaces a familiar local person with a toll-free telephone number to call if they have questions or concerns. Child Care Project staff hope that organizations like SCEOP will be funded to offer local-level support for the registration process.

In the private sector, the county's major employer, Corning, now offers child care resource and referral assistance to its employees, who are rather highly paid by local standards. The company works through an organization affiliated with the local school district. SCEOP and this group cooperate to ensure that Corning employees and other county residents receive equal treatment. The negotiations reminded the staff that it can be difficult for any organization to mix effective publicly funded services for the low-income population with fee-based services that reach all income groups in the community.

TEXAS LICENSING DIVISION

Houston, Texas

The regulatory approach to family day care in Texas changed in 1976 from a licensing system that reached relatively few providers to a registration process designed to reach a larger number. The registration standards were minimal, and visits to the provider's home were made only to investigate complaints concerning abuse, neglect, or serious safety violations. The Texas legislature, which determines the state's regulatory policy, reflected the sentiments of the state's rural population when it maintained that the government had no business intervening in private homes.

The director of the state's licensing division, Cris Ros-Dukler, worked throughout the 1980s to change her division's relationship to family day care. Concerned that the division was not meeting its obligations to protect the safety of children in registered family homes, she campaigned for funds to pay for routine inspections of the state's 14,000 registered homes. Budget constraints facing the state make it an ongoing uphill battle to win support and funding to regulate family day care, but several incremental changes and innovations have reoriented the stance of the division toward home-based care.

In 1987, the division initiated a public process to revise the standards for registered family homes. In 34 public forums, Ros-Dukler solicited ideas from family day care providers across the state. The discussions focused her attention on the role that family day care associations could play as organizing mechanisms to represent providers and promote professionalism among them. The licensing division then committed both financial resources and staff to support the development of associations, in partnership with a Houston resource and referral agency known as Initiatives for Children.

At about the time the association-building effort mushroomed, a federal grant for improving the monitoring of family day care enabled the division to initiate Project Cherish, a two-year program that sent licensing workers into a random sample of over 3,000 registered family homes across the state. The project enabled the division to learn more about the care provided in registered family homes, to pilot routine licensing visits, and to begin working to increase public awareness of the limitations of registration. To ensure that their visits would be accepted by providers, Project Cherish staff approached providers respectfully and emphasized the technical assistance aspects of home visits more than the "policing" components.

The Community

The shift in the licensing division's orientation from an approach of strict enforcement to one that stresses partnership and technical assistance has affected communities throughout the state. The experience of the Houston office shows how changes can take place in a large urban area with substantial pockets of poverty. Houston is ethnically diverse and has a substantial Spanish-speaking population and many Southeast Asian refugees. Although family day care providers throughout the city and suburbs felt some effects of the changed role of state licensors, the contrast between old and new attitudes was especially strong in the poor neighborhoods close to downtown. There, adversarial relationships between licensors and providers had once been prevalent.

Houston is a low-rise city of freestanding, single-family homes that even in poorer neighborhoods feature small yards with trees for shade from the hot Texas sun. Local residents know well the streets and landmarks that divide the poorer neighborhoods from affluent areas nearby. For instance, one single-parent provider lives in a modest house behind a chain-link fence a block from Main Street. A wealthier neighborhood lies just across Main Street. This provider explains that high-income families living a few blocks away sometimes receive her telephone number from the child care referral service, but she knows that "they won't come to this

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The shift in the licensing division's orientation from an approach of strict enforcement to one that stresses partnership and technical assistance has affected communities throughout the state.

neighborhood, once I say I live on the north side of Main Street." The city's 23 family day care associations also reflect the strong influence of neighborhoods. Most are small and neighborhood-based because providers hesitate to drive in the evenings to areas they do not know.

- **A 1989 reorganization consolidated the licensing department management functions and saved $400,000 to pay for staff to visit registered homes and to work with provider associations.**

Sponsoring Organization

State law mandates that the Licensing Division of the Texas Department of Protective and Regulatory Service ensure the health and safety of children placed in out-of-home child care, and promote their well-being. The law calls for developing and enforcing minimum standards, and also for the provision of technical assistance to help licensees comply with the standards and establish quality early childhood programs.

Until the division's involvement with registered family homes increased, little was done to assist programs to achieve quality. Nearly all of the division's resources went to enforce minimum standards. Twelve office workers processed registration applications for family day care providers, and 145 licensing representatives monitored centers and investigated complaints about registered homes and centers in the state's 254 counties.

[illegible]

Texas licensors work with local provider associations to assure that family day care homes in Houston are safe and nurturing environments—such as the one where this child naps.

In 1992, funds from the federal Child Care and Development Block Grant helped expand technical assistance and the inspection of registered family homes. The licensing staff increased. For example, the Houston regional office staff grew from 50 to 65. A 1989 reorganization consolidated the licensing department management functions and saved $400,000 to pay for staff to visit registered homes and to work with provider associations.

The Family Day Care Effort

Ros-Dukler's campaign to improve the care in Texas family day care homes encompassed three initiatives—revision of the standards for registered family homes, support for family day care associations, and initiation of routine visits to registered homes. Revised standards, which took effect in July 1990, gave Texas some of the nation's most stringent registration requirements, including a high school degree or its equivalent, attendance at a six-hour orientation session, a certificate of CPR and first aid training, and completion of 20 hours of other training each year.

The emphasis on training and education was validated by data gathered on Project Cherish visits to 3,065 registered homes. According to the study, compliance with registration standards was highest in the homes of providers who had attended the state-sponsored orientation session, had a high school degree and some training, and were members of an association or support group. These providers were "out of compliance" with only four out of 100 items on the registration checklist.

Raised standards contributed to a more professional image for family day care among providers and in the community. One licensing worker observes: "Now, with the upgraded standards, more training, networking, and exposure to other child care professionals, [the family day care providers] consider themselves more professional, and they are."

Family day care associations also cultivate professionalism. Ros-Dukler's interest in associations began when she established an ad hoc committee of 18 providers to participate in the development of the revised standards. Since there was no group to represent providers, Ros-Dukler used the public forums she held across the state to invite nominations for the ad hoc committee that worked with the licensing division for two years. As a more long-term solution, she set out to help establish provider associations.

In 1988, the licensing division made a $180,000 two-year grant to the Houston-based Initiatives for Children to create a manual and training process to develop strong provider associations across the state. The manual, entitled *Steps to Professional Growth,* reviews the challenges that associations often face in starting a new organization, attracting members, maintaining interest, and managing group dynamics. The Initiatives for Children staff held 13 workshops in different parts of Texas to train providers to use the manual. As long as state grant funds were available, free manuals were given to any group requesting them. (The manual now costs $20 per copy.)

One product of this work was the Texas Professional Home Child Care Association, a statewide association made up of board members from many local associations. Its annual provider conference drew over 700 participants in 1992. The licensing division supported the conference by printing and mailing fliers, paying speakers, and assigning licensing workers to help with the logistics. It also sponsored annual retreats for the association leaders. The licensing division has offered similar supports to local associations by offering speakers, lists of providers, mailing labels, and printing assistance to any provider group requesting help. Support for local associations is one of the "critical success factors" assessed in performance reviews for licensing staff.

The rationale for these efforts lies in the conviction that a strong professional association contributes to quality care through peer pressure. The licensing staff have come to believe in the benefits of this form of professional development. One explains, "Once [the providers] started communicating and learning from each other, that is when they started growing, and coming up with new ideas, utilizing someone else's ideas, and sharing ideas." Moreover, associations help put providers on more equal footing with licensors. As Ros-Dukler puts it, "When they feel supported, they needn't feel scared by our presence. It helps stop the cat-and-mouse game."

As association participation began to change the behavior and self-image of providers, Ros-Dukler also worked to reorient the licensing staff to establish a more positive relationship with providers:

> *The traditional role of licensing is to police. We issue tickets, we are out of there. But we all know that issuing tickets is not going to change people's behavior. It is educating people that changes their behavior. . . . I don't know of any significant, lasting positive change that stemmed from an adversarial relationship.*

Moving away from a policing role called for staff attitude changes toward family day care. Beginning with Project Cherish, licensors in training spent several days observing in registered family homes to better understand the demands providers face. The change also meant shifting the purpose of visiting—from inspection to technical assistance. As one licensing supervisor notes, "If you monitor without technical assistance, you're just filling out paperwork and meeting bureaucratic requirements. You are not doing a thing about improving the quality of child care."

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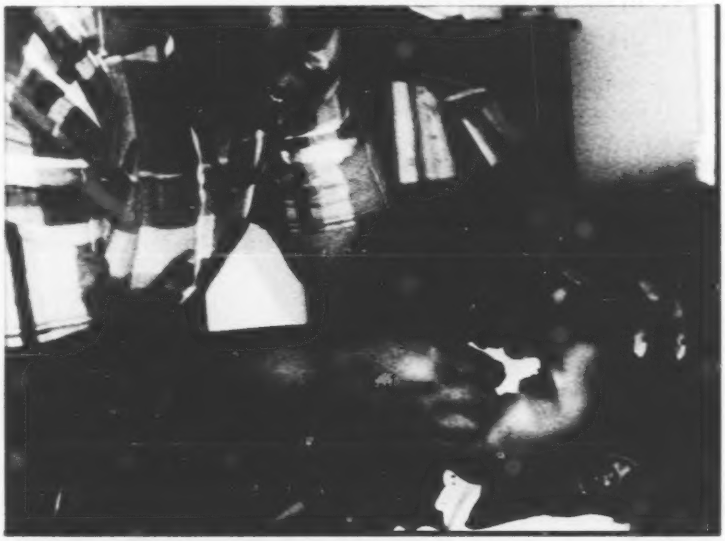
The rationale for these efforts lies in the conviction that a strong professional association contributes to quality care through peer pressure.

Challenges and Next Steps

- **Registered family homes were added to the inspection caseloads of all the state's licensing workers, and the vision of routine oversight for family day care homes was becoming a reality.**

By 1992, the revised and strengthened standards for registered family homes were in place, and there were 74 local family day care associations as well as the statewide association. Family day care was well on its way to acceptance as a component of the professional child care delivery system. By "preaching the gospel of partnership" between licensing staff and provider associations and other groups outside the government, Ros-Dukler built support for administrative changes within the licensing division. Registered family homes were added to the inspection caseloads of all the state's licensing workers, and the vision of routine oversight for family day care homes was becoming a reality.

These changes have not been painless. Adding family day care homes to the center lists for monitoring has increased workloads. Moreover, the attitudes of wariness and mistrust that licensing staff and family day care providers have felt toward one another for years cannot be changed easily. Many licensors are unfamiliar with family day care and feel uncomfortable about entering private homes. Their expectations are colored by experiences from the time when they visited registered family homes only after a complaint was filed. Then they saw only problem homes, not the many homes that offer excellent care to children. Even with a positive attitude, workers often find it difficult to balance regulatory scrutiny with helpful technical assistance: they are not sure where to draw the line between friendliness and firm objectivity.



Mary Larner

Ida Richardson has been a family day care provider for 28 years in her modest home on the north side of Main Street, Houston, Texas.

Sul Ross, the director of the regional licensing office that includes Houston, notes that five years ago, his office could not identify a single provider to speak at a meeting Ros-Dukler wanted to hold in Houston. Now, providers call the office regularly to ask for assistance. Increased contact between licensors and providers at provider meetings, at conferences, and on routine visits has helped normalize relations between the groups. One Houston licensing supervisor reports, "When we started getting out and seeing what it was like, they realized that we are really ordinary people trying to help them."

Recognition that licensors and providers have the same goal—to see that children are safe and well cared for—is growing. Ros-Dukler argues that "ensuring the safety of kids is a responsibility shared by three entities—providers, government regulatory bodies, and parents." Establishing the necessary positive, collegial relationships between licensing staff and providers is a long-term approach to the promotion of quality in child care. The next step is to strengthen the voice of parents, through consumer education and public awareness activities, to fulfill the crucial role only they can play in assuring that their children are safe, challenged, and happy in child care.

WU YEE RESOURCE AND REFERRAL

San Francisco, California

The offices of Wu Yee Resource and Referral occupy a modern building on a hectic corner in the midst of San Francisco's Chinatown. Inside, a range of human services agencies work to serve the Chinese community. When mothers, fathers, or grandparents with small children enter the building, they often head to the child care resource and referral office, where they can talk with a staff member about their needs, borrow children's books in Chinese, or get help finding their way through the maze of the U.S. human services system. They can get information about child care centers and preschool programs, or they can learn whether one of the over 150 family day care providers listed at the agency might suit their needs. While other child care resource and referral agencies do most of their work by telephone, Wu Yee serves the majority of its clients in person.

Family day care is almost the only child care choice for parents of infants in this community. Chinatown offers child care for over 2,500 children under five, but the centers in the area accommodate only 16 infants. Home-based care appeals to many Chinese parents because they want a caregiver who speaks their language. This ensures that their children hear and speak Chinese during the day, and that communication between the parent and provider is easy. Wu Yee reaches out to the Asian community's home-based caregivers to help them become licensed, to improve the quality of the care they provide, and to support their efforts to succeed professionally and financially in the U.S. child care system.

The Community

San Francisco has one of the nation's largest Asian communities, and a recent influx of immigrants from Southeast Asia have joined the city's long-standing population of ethnic Chinese. Many newcomers settle first in the crowded apartment buildings of Chinatown, immediately north of San Francisco's fashionable business district. Many immigrant women with limited English skills find that caring for the children of other Asian parents is an attractive employment opportunity. Child care is a competitive and uncertain business, but the alternatives are not much better—tiring, minimum-wage jobs in sewing factories, restaurants, or hotels.

Many of the immigrants on Wu Yee's list of family day care providers were teachers in their home countries. They bring with them experience with groups of children and an interest in child learning. Those who speak little English have almost no hope of teaching in American schools, and many turn to child care as a way to work in their chosen profession. Despite their strong educational qualifications for work with children, those individuals who choose to care for children in their homes face challenges posed by the living conditions in Chinatown.

Housing in San Francisco is expensive, and immigrant families often share living quarters. A five-room Chinatown flat may house two or three families. While licensing standards in some states regulate the amount of floor space that must be available in a family day care home, California regulations do not. Yet child care is not practical under very crowded conditions. The staff of Wu Yee encourage providers to consider their space situation before deciding to enter the child care business, and they urge parents to consider the space available to the children when they choose a home-based provider.

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Many immigrant women with limited English skills find that caring for the children of other Asian parents is an attractive employment opportunity.

Some of Wu Yee's Asian American providers have been in the United States for 10–20 years and have raised their children here. More typically, however, a new recruit is in her 30s, has one or two young children of her own, arrived in America two or three years earlier, and has a husband employed in an unskilled, low-wage job. The drive for upward mobility is strong, and often the provider's family saves for several years to move out of Chinatown to an apartment or house in a more spacious, middle-class community in or near San Francisco. The families who seek child care through Wu Yee are also dispersed throughout the city. Statistics gathered in 1987 showed that half the parents who called Wu Yee requesting child care referrals lived outside of Chinatown. The agency can connect parents and providers in all parts of San Francisco, but both logistics and funding prevent it from serving those who move out of the city.

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The caregivers receive individualized assistance to help them understand government regulations and the expectations of parents—and to help them take advantage of resources offered by the mainstream child care system.

Sponsoring Organization

Since its inception, Wu Yee Children's Services has worked to develop a supply of licensed family day care providers who can serve the city's Asian families. In 1977, a group of Chinatown's community leaders, parents, and social services professionals joined together to establish the agency to address the need for child care and parent services for the Asian population. Two sister agencies make up Wu Yee—the resource and referral program, and a child care program that operates three bilingual, bicultural centers. Part child care agency and part community organization, Wu Yee Resource and Referral responds to the child care requests of 2,400 families per year; holds activities for parents; and publishes a newspaper in three languages, the *Wu Yee Times*, which reaches 6,500 readers throughout the San Francisco area.

RESOURCE AND REFERRAL

Mary Lerner

In San Francisco's Chinatown, Wu Yee staff members Felicia Kwong and Margaret Leung work to assist immigrant and Asian American family day care providers with training and licensing.

Wu Yee is one of a network of agencies funded by the state to provide child care referrals for parents and develop child care resources. City funds cover the costs of the business training course for family day care providers. The agency invests special energies in the 70–80 family day care providers on its lists who speak limited English. The caregivers receive individualized assistance to help them understand government regulations and the expectations of parents—and to help them take advantage of resources offered by the mainstream child care system.

The Family Day Care Effort

Wu Yee's approaches to developing a supply of family day care providers are common to many resource and referral agencies, but the agency tailors its strategies to meet the special needs of Asian caregivers who have limited mastery of English. The effort begins with outreach activities to interest Asian immigrant women in becoming licensed child care providers.

Although a large number of immigrant women care for children informally, many are reluctant to secure a license. The license application procedure and tax reporting requirements are complicated and intimidating. Promoting the idea that licensed family day care is both a valuable type of child care and a plausible employment option, the staff of Wu Yee write articles about family day care for the *Wu Yee Times*, participate in Chinese-language radio and television talk shows, and speak at schools and community events. They also work to make the licensing process easy and beneficial.

Assistance with licensing. The first step for women who want to become licensed family day care providers is to attend an orientation session. This three-hour information meeting, required by the San Francisco County Community Care Licensing Department, was offered only in English until recently. Wu Yee now offers a monthly session in Chinese, which licensing authorities now acknowledge. Margaret Leung, Wu Yee's family day care coordinator, leads the session. It usually attracts about 20 people. She also gives out translated application forms and explanatory information in Chinese.

Leung sees these meetings as an important opportunity to clarify which individuals are likely to succeed as providers and find the work satisfying. "We try not to develop an oversupply," she says. "We try to get people who are trained in early childhood and who like the job."

In her matter-of-fact manner, she tells the audience what they can expect as family day care providers. She explains that most parents will want to place infants in family day care, and place preschool children in centers. She reveals the competition a new provider faces, by showing a map with a dot for each licensed child care home. She comments that there are several times as many licensed-exempt as licensed caregivers in most neighborhoods, especially in Chinatown. She urges the women to discuss frankly the realities of operating a home-based child care business with family members, because it can disrupt family schedules and intrude on the privacy of adults and children living in the home.

Only about 10 percent of those who attend orientations will follow through and become licensed. Leung explains:

> *They think too many things are involved, like regulations and competition, health and safety issues, family issues, the expenses they have to pay on their own. So they go back home after orientation and think about it. Some will come back after a year, when they are all prepared, when they have some money and support in their home. They do the training [offered by Wu Yee], and when they start, they are really prepared.*

With individuals who follow through, Leung discusses the licensing application in detail, and she makes a two-hour home visit to help design a floor plan and make a list of equipment and materials needed for the home to pass licensing inspection. She also checks the completed application before it is mailed. Once the provider clears the licensing hurdle, Wu Yee offers child care equipment on a six-month loan, adds the home to the agency's child care referral list, invites the provider to attend training sessions, and explains the federal Child and Adult Care Food Program, enrolling providers.

Referrals. Since Wu Yee is funded to offer parents referrals to child care, the agency can help new providers find their first clients. Of the 150 providers on the referral list, more than half speak little or no English and must look to the Asian community for clients. The others are bilingual and can serve children from different cultural and language backgrounds. Often, parents of Chinese heritage hope to find a Chinese provider, to help the child master the language, although some are eager to expose their children to English. The small size and homelike quality of family day care can be important for children who are new to the United States because it is so much less intimidating than attending a child care center where "strangers" speak an unfamiliar language. Nevertheless, Asian parents are as likely as other parents to seek a center-based program for children three and older. This leaves the family day care providers largely with a clientele of infants and toddlers.

Government child care subsidies support relatively few of the children in the Asian family day care homes. Child care assistance frequently is linked to welfare, and

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The small size and homelike quality of family day care can be important for children who are new to the United States because it is so much less intimidating than attending a child care center where "strangers" speak an unfamiliar language.

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Wu Yee offers two types of training for family day care providers: 15 hours of initial training in business skills, and 15 hours of advanced child development training.

immigrant families are not eligible to receive most forms of public assistance during their first years in the United States. Others are reluctant to accept government support for fear it will harm their chances for permanent immigration. In 1993, Wu Yee contracted with the Mayor's Office of Children, Youth, and Family to administer child care subsidy vouchers, and program staff can now help Asian families or caregivers to take advantage of those resources.

Links to the food program. Wu Yee is not a federal food program sponsor, but it serves as a liaison to one of the local sponsoring organizations to help enroll and work with Asian providers who have limited English proficiency. Wu Yee's food program coordinator has translated the program forms, routinely explains to providers how to categorize Chinese foods on the American menu plans, and then collects and rewrites the providers' claims in English before submitting them for reimbursement. Because of the paperwork and the fact that the food program payments are low in relation to food costs in San Francisco, only about 20 percent of the providers on Wu Yee's referral lists participate in the program. Many prefer to ask parents to bring meals for their children.

Mary Lerner

Wu Yee training workshops for family day care providers demonstrate the many roles of toys and materials in infant and child development.

Training and ongoing support. Wu Yee offers two types of training for family day care providers: 15 hours of initial training in business skills, and 15 hours of advanced child development training. The basic course covers business practices like marketing, record keeping, and taxes, as well as principles of health, safety, and child development that are important for sensitive caregiving. As Norman Yee, the agency's director, explains: "You cannot have a good child care business with a weak program" in terms of child development. The course is held free of charge on four Saturdays for a group of about 15 new providers.

For experienced providers Wu Yee offers advanced training in child development, as well as two or three workshops a year on special topics such as discipline, communication, storytelling, science activities, and caring for children with special needs. In addition, for those people who are serious about a career in child care, Wu Yee conducts a series of childhood classes in Chinese for 18 units of college credit. This course does not focus on family day care specifically, but on broader issues. Of the 25 participants who attend whenever the course is offered, three or four typically are family day care providers. The others plan to work in center settings. Leung points out, however, that the trainees often try out both forms of child care work:

> *I have Chinese providers who get training, but somehow the home situation is not right for them to get licensed, so they pick up more training units and go to a child care center. Some go the other way. They work for the center for some time, then decide to go back home. Then they start renovating when they have enough money for it.*

All of the agency's family day care training programs cater to the concerns and educational needs of the immigrant community. The training for new providers covers cultural differences in such areas as feeding and dressing children, to help the providers feel comfortable caring for children from other ethnic backgrounds. Language barriers make it difficult for many Wu Yee providers to benefit from the numerous conferences, workshops, and association meetings that support the professionalism of English-speaking family day care providers in the San Francisco area. Wu Yee works to convince conference organizers to provide translation. When an English-only event seems especially valuable, Leung may accompany several providers and quietly translate for them. As one provider who speaks only a little English explains:

> *The class was translated by a Chinese lady, so it was convenient for me. If it is all in English, sometimes I do not understand. I have not gone to any classes that are all in English.*

A support group of Chinese family day care providers began monthly meetings in 1993. In addition to sharing a potluck meal and discussing their experiences, the providers hear a report from one bilingual group member who attends meetings of the San Francisco Family Day Care Association. Leung reminds providers about the time and location of the meeting, and she sometimes organizes carpools to offset their reluctance to travel alone in the evening to a different part of the city. The support group meetings give the providers a chance to enjoy themselves and talk with their peers. As one experienced provider puts it, "It is good to get together and also to learn new things. I teach others new things sometimes."

Advocacy. The work of Wu Yee is respected both in the child care world and in the Chinese community. This credibility enables the agency to focus public attention on the importance of accommodating the needs of those who speak little English. Norman Yee chairs the Mayor's Advisory Council on Child Care. His participation in a range of child care and community coalitions has helped him convince several child care groups to add workshops in Chinese to their conference agendas.

The Wu Yee staff also urged the city's Office of Community Development to consider Asian providers as potential recipients of renovation grants for low-income individuals who operate licensed family day care homes. The city allocates federal Community Development Block Grant funds to assist providers to modify rooms or garages to house a group family day care business that will serve up to 12 children and involve at least one assistant. Of the 26 ambitious renovation projects undertaken between 1984 and 1992, two were in Asian homes that Wu Yee brought to the city's attention.

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The work of Wu Yee is respected both in the child care world and in the Chinese community. This credibility enables the agency to focus public attention on the importance of accommodating the needs of those who speak little English.

Program Structure and Funding

Wu Yee's work with family day care providers is integrated within the agency's activities, in terms of staffing and funding. In addition to the director, the agency employs a supervisor, a family day care coordinator, a liaison who works with the food program sponsoring organization, one counselor who fields child care requests from parents, and another who holds workshops for parents. The primary source of agency funding is a state grant to provide child care resource and referral services, of which about half goes to pay for the parent referral service. The other half goes to resource development in the form of technical assistance to providers.

The agency's family day care training courses are funded through annual grants of $25,000 from the San Francisco Office of Community Development. Since the agency does not sponsor the food program, it receives no administrative funds for it, although the food program sponsor pays the liaison staff member's salary. In addition to these public funds, the agency has successfully raised funds privately from individuals and businesses in the local community. Although community-based agencies like Wu Yee seldom have the money to support all the work they would like to undertake, the agency's funding has been relatively stable and reliable.

- **Translating and advocating for immigrant groups is rewarding but demanding work that is rarely covered fully in project budgets.**

Challenges and Next Steps

Acting on its image as a community-based organization, and not solely a child care agency, Wu Yee addresses a wide range of issues facing San Francisco's Asian community. For instance, Wu Yee has joined a coalition of 30 organizations to raise awareness about the problem of pedophiles abusing Asian youth. The agency also has helped establish the Asian Parent Education Network and worked with local health centers, mental health agencies, programs for battered women, and other child care groups to conduct the first citywide conference for parents to be held in Cantonese. Moreover, the agency has extended its reach into the Southeast Asian community in the Tenderloin area of San Francisco. It now manages a project there offering home-based services for high-risk infants. This project has helped the agency add staff who can communicate with Cambodian, Laotian, and Vietnamese families and caregivers.

When asked how the agency decides whether to become involved in such projects, Norman Yee remarks, "I look at the needs, I look at who else can do it, I consider the strengths of our organization and our standing in the community, and I look at how it relates to parents and children." Of course, the funds available to support the project must also be considered, since translating and advocating for immigrant groups is rewarding but demanding work that is rarely covered fully in project budgets.

This garage in San Francisco was renovated under a city grant to a Chinese provider to make it suitable as a group family day care home for up to 12 children.

Mary Larner

Ana Ortiz of Hartford, Connecticut, welcomes visits from the staff of La Casa de Puerto Rico, who respect her work with children and offer her support.

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